



Practitioners' Perceptions of the Boundaries between Coaching and Counselling

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**PRACTITIONERS' PERCEPTIONS OF THE BOUNDARIES
BETWEEN COACHING AND COUNSELLING**

by

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the requirements for the degree of Doctor of Philosophy

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ABSTRACT

Counselling and coaching use specialised skills to help individuals address problems and make a positive change (Egan, 2010). Whilst sharing many commonalities with counselling, the coaching industry has endeavoured to define boundaries between the helping approaches to establish discrete areas of practice. However, rather than observe theoretical boundaries, many coaches rely on personal experience to idiosyncratically define boundaries in practice (Maxwell, 2009; Price 2009). The reliance on experience to inform practice judgements has significant implications for novice coaches. Without the advantage of contextual knowledge to assist with identifying boundaries, it is important that newly trained coaches are aware of working within their competency to ensure good practice.

To investigate whether clear boundaries could be identified, a mixed-methods approach was used to explore novice coaches' and experienced coaches' and counsellors' experiences of working with the boundaries between the helping approaches. Study one incorporated a survey and Interpretative phenomenological analysis of interview transcripts to investigate novice coaches' perceptions of boundaries. Study two utilised a survey design to gain a broad understanding of experienced counsellors' and coaches' perspectives, while Study three involved an in-depth analysis of the experiences of 20 coaches and counsellors working with boundaries between coaching and counselling in practice.

Findings from the first study indicated novices' confusion and inconsistencies when identifying the differences between the approaches. The results suggested that newly trained coaches may work beyond their competencies when working with mental health problems in practice. Results from studies with experienced practitioners indicated that there is a large overlap between the helping approaches and identified different

ways of working with boundaries. Some practitioners were adamant that boundaries should be preserved between coaching and counselling. However, a third of practitioners surveyed indicated that integrating approaches would be beneficial to meet the clients' needs. The thesis illustrates practitioners' concerns relating to the content and provision of coach training programmes and offers recommendations that aim to encourage a review of minimum standards in coach education. In addition, collaboration between coaching and counselling professional bodies is suggested to establish ethical guidelines for coaches and counsellors who wish to blend coaching and counselling practice.

DECLARATION

I declare that this thesis is my own unaided work. It is being submitted for the degree of Doctor of Philosophy at the University of Bedfordshire.

It has not been submitted for any degree or examination in any other University.

Name of Candidate: Sarah Baker

Signature:

Date:

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Preface

As this research programme incorporates two interpretative phenomenological analysis studies, I feel it is appropriate to share some background information about myself, so that my personal phenomenology is transparent.

I first became interested in the boundaries between coaching and counselling when studying psychology. I questioned how coaching psychology differed from counselling psychology. Whilst I understood the proposed differences and theoretical boundaries, I wondered whether they could be consistently identified and applied in practice. I didn't understand how individuals could leave their historicity outside of a discussion which focused on motivation and changing behaviour. I believed that their values and patterns of behaviour would emerge in coaching sessions. The more I reflected, the more questions I had, such as: How do practitioners identify differences between the approaches? How do they manage the boundary with their clients? Are they confident that they accurately identify the boundary and only work within their competence? Have they ever felt unsure or uncomfortable? What support would they like to receive? What training do they need? Do they feel confident? What are the main challenges? How do they keep themselves safe?

I have always had a desire to know and understand. However, until recently I would not have considered myself a scientist. I now recognise that one of the greatest drivers in science is the underlying aspiration to understand how and why something works. Indeed, it could be argued that science investigates and interprets findings to provide an explanation for why phenomena happen (Cox, 2013). Whilst some discoveries may occur due to chance and serendipity, I prefer to actively deconstruct issues, ask questions, examine phenomena and consider possible solutions that will help people. I like to understand.

When contemplating the research programme, it was very important to me that any findings would be accessible to professional coaches and counsellors. My initial discussion with practitioners led me to believe that many coaches and counsellors were eager to see research in this area. There appeared to be a desire to be heard and for greater understanding of the active practitioners' perspective. I feel that the people who volunteered to take part in the study have considered their management of boundaries at length and brought their considered perspectives to the research. I believe practitioners would like some clarity or reassurance about how the boundaries will be managed in the future.

Before I returned to education, I had worked in customer relations for banks, global organisations and in retail. I have also worked as a massage therapist, counsellor and a coach. I currently teach undergraduate coaching psychology at the University of Bedfordshire. I feel that I can empathise with the dilemmas that practitioners experience and can appreciate the opinions of people who wish to maintain the boundaries between the disciplines. I am also curious about people who choose to work with both disciplines. The practitioners may choose to work with a client as a counsellor or as a coach, re-contracting as necessary. Alternatively, they may choose to blend approaches, meeting the client's needs as both a coach and counsellor.

Whilst engaged in the interviews with participants, I tried to demonstrate my interest and engagement with their opinions. At times, the interviews were conversational to encourage the practitioners to share information that would help me gain a deeper understanding of how they relate to the world. I believe that my interpretations of the participants' transcripts are reflexive representations of their phenomenological experiences and perspectives.

Finally, I would like to clarify that I did not feel any outside pressure influencing my interpretation or perspective. I do not have any political reason for undertaking the research; I do not currently hold any position in

any professional body, nor do I have a particular preference to either keep the boundaries discrete or blend helping approaches. My research is driven by curiosity and a desire to gain knowledge.

Chapter 1 Introduction and Overview

1.1 Introduction

This doctoral thesis documents a programme of research designed to explore counselling and coaching practitioners' perceptions of the boundaries between the disciplines. As the first chapter in the dissertation, the aim of this introduction is to discuss the helping professions and introduce counselling and coaching approaches. The overlap between the disciplines will be considered and a rationale for the aims and objectives will be presented. This will be followed by an outline of each chapter in the thesis, providing an understanding of the studies and an explanation for how the research programme addresses the research objectives.

1.2 Helping Professions

A 'helping' profession may be described as an occupation that uses specialised knowledge and techniques to assist individuals to address psychological, intellectual, emotional or transpersonal issues. The aim of the 'helping' profession is to help people develop their resources to manage problems and identify resources to help them fulfil their potential. Counselling, psychotherapy and coaching are professions that use specialised skills to help individuals explore and develop creative solutions to address problems and make a positive change (McLeod, 2009). The professions encourage people to learn skills and strategies that can be used to overcome obstacles and problem situations and maintain an action orientated approach.

Within helping professions, the relationship between the helper and the person seeking support is often seen as fundamental to achieving successful outcomes (Lloyd and Maas, 1993; Boisvert and Faust, 2003; Hubble et al., 1999). The interpersonal relationship is based on open,

supportive communication and seeks to develop rapport by demonstrating empathy, respect, authenticity and commitment to the client's objectives.

Indeed, people may bring a variety of blocks, defences and behaviours that restrict their growth and optimisation. As a consequence, the person may find it challenging to clearly identify solutions (Egan, 2010). The helper would therefore need to use interpersonal skills such as active listening, questioning, reflecting and challenging, to help the person gain more self-awareness and identify possible strategies to help them overcome their difficulties (Hough, 1998). In addition, they may apply a specialised body of knowledge, gained through specialised training and learning, to benefit the client and help them identify idiosyncratic solutions (Egan, 2010). It has been argued that the helper has an ethical responsibility to use their specialised knowledge in a way that will benefit the client rather than causing harm. This may be more complicated and ambiguous than it initially seems, as what may be good for one person may be potentially damaging for another (McCully, 1966).

1.3 Counselling

Within a social context, counselling may be seen as one of the principal ways of offering a supportive relationship. Over the course of the 20th century, the meaning for counselling has evolved. Counselling is a social interaction informed by cultural norms and social values (McLeod, 2009). As a result, the roles of counsellor and client are defined by social expectations and cultural beliefs (Feltham, 2007; McLeod, 2009). Within the UK, counselling was originally provided by volunteers and caring professions to help when people experienced a specific acute traumatic event in a social context, e.g. bereavement or relationship problems (see Chapter 2) (McLeod, 2009). Indeed, nurses, doctors, social workers, teachers, community workers and clergy commonly offer guidance and utilised counselling skills such as active listening questioning and demonstrating empathy to provide emotional support and understanding at times of distress or confusion in the course of their work (ibid). As a result,

it has been argued that counselling is somewhat ill-defined, with no barriers to practice (Farrell, 1993).

1.3.1 Professional Counselling

Counselling takes into account the way the person interacts with the world and the people that they live with. Rather than being seen in a traditional context of offering advice or guidance, counselling as a profession, within the UK, is more aligned to a psychological helping approach which offers therapeutic interventions or therapy (Mearns & Dryden, 1990). The focus on psychological models has led to a blurring of the lines between counselling and psychotherapy. Indeed, many of the problems and client goals addressed in counselling and psychotherapy demonstrate a considerable overlap. Whilst there is a prevalent belief that there is a definite difference between counselling and psychotherapy, professional bodies and practitioners have been unable to agree on exactly where the difference lies (Thorne, 1992).

The United Kingdom Council for Psychotherapy (UKCP) argues that the difference between counsellors and psychotherapists lies in the level of training therapists and counsellors receive (UKCP, 2012). Whereas recognised counselling training is generally accredited at degree level of education, psychotherapists are required to acquire in-depth knowledge at a postgraduate level (BACP, 2009). In addition, psychotherapists claim to work at a greater depth with clients. However, many of the proposed differences have been challenged, as the therapeutic techniques and methods used by psychotherapists are also implemented in counselling (Paterson, 1974). Additionally, in practice, the suggested differentiation does not seem to affect people seeking help, nor is there a noticeable difference for the client in the therapy received (Kwiatkowski, 1998).

Whilst many feel that they have an understanding of what counselling entails, the concept can be understood and explained in many different ways. Indeed, it would appear that there is no general consensus of definition in academic literature or professional bodies. Each proposed

description presents a different perspective, dependent on context or source of information. In the past, definitions of counselling focused on the process and the relationship with the client, from the perspective of the counsellor:

“Counselling denotes a professional relationship between a trained counsellor and a client. The relationship is usually person-to-person, although it may sometimes involve more than two people. It is designed to help clients to understand and clarify their views of their lifespace, and to learn to reach their self-determined goals through meaningful, well informed choices and through resolution of problems of an emotional or interpersonal nature” (Burks and Steffire, 1979, p.14).

Over the past 20 years, counselling has become self-regulated by professional bodies such as the British Association for Counselling and Psychotherapy (BACP) and the UK Council for Psychotherapy (UKCP). These bodies implement stringent code of ethics and require minimum standards of training, with reflexive personal development for accreditation. As a result, later definitions focused on the comprehensive training that professional counsellors have undertaken to demonstrate knowledge, skills and ethical practice and receive accreditation from professional bodies:

“Counselling entails an attention focused form of communication which involves active listening, paraphrasing, summarising, asking questions, encouraging clients to expand on their explanation, reflecting on feelings, encouraging people to focus on difficult issues [and] helping to clarify thoughts and challenging when necessary” (Hough, 1998, p.5).

“Professional forms of counselling... are based on formal training which encompasses attention to pertinent theory, clinical and/or

micro-skills development, the personal development/therapy of the trainee and supervised practice” (Feltham, 2012, p.3).

Rather than accentuating the professional standards of counselling, recent definitions of counselling have sought to define the counselling approach in a way that is more accessible to the general public. Counselling bodies such as the British Association of Counselling and Psychotherapy (BACP) have taken steps to provide clearly stated client-focused definitions.

“Counselling and psychotherapy are umbrella terms that cover a range of talking therapies. They are delivered by trained practitioners who work with people over a short or long term to help them bring about effective change or enhance their well-being” (BACP, 2014).

In addition, BACP offer user-friendly explanations of counselling to set client expectations of the helping approach.

In a complex society, with multiple responsibilities and competing demands on time, counselling offers a multitude of approaches to help people reflect, explore and create solutions (see Table 1). Seeking counselling does not necessarily indicate pathology or mental ill-health. Counselling occurs when a person experiences difficulties or distress in their life; a person may choose to seek help to reflect on their issues and identify actions to help them overcome problems. The confidential counselling relationship is based on core values of dialogue, reflexivity, collaboration and belief in the worth and value of the individual. Counselling aims to enhance self-awareness and empower individuals to make conscious choices that bring about a reduction in confusion or distress.

Table 1 Counselling Approaches

Therapeutic approach	Brief description
Behavioural Therapy	Based on the psychological theory of behaviourism, which suggests that behaviour is learnt from past experience. May be beneficial for addressing fears, phobias, addictions and compulsive behaviours.
Cognitive Therapy	Based on psychological knowledge of thoughts and cognitions. The therapy helps clients to become aware of their negative automatic thought processes and how these can influence behaviour. Clients are helped to challenge negative views to become more positive in their outlook.
Cognitive Behavioural Therapy	This approach incorporates a combination of behavioural and cognitive psychological theories. Clients are taught techniques to overcome negative thoughts and behaviour. Widely used within the NHS to help people manage stress, eating disorders and depression.
Existential Counselling	A philosophical approach that helps people reflect on crises with living. Core aspects addressed include meaning in life, responsibilities, existential isolation and fear of death.
Gestalt Therapy	Based on a psychological theory of perception. Gestalt adopts a holistic view of the whole person. The client is encouraged to become aware of their actions, body language, thoughts and feelings. Therapy may include active elements such as role play or dance.
Integrative Counselling	This therapy incorporates several models of counselling based on the counsellor's knowledge and experience matched with the client's need.
Neuro-Linguistic Programming	Not generally recognised as a distinct model of therapy (BACP, 2014). NLP is often used in conjunction with therapeutic models, from choice and flexibility through to modelling successful behaviours.
Person Centred Counselling	Based on humanistic principles of self-development and achieving potential. The client is seen as the expert, with the resources to explore and overcome personal issues. The client is encouraged to lead the therapeutic process and openly express their thoughts and feelings.
Psychodynamic Counselling	Based on the psychological theory of psychoanalysis. The approach focuses on past experience and unconscious processes influencing behaviour. The therapist works with the client's transference of feelings from previous experiences within the dynamics of the therapeutic relationship.
Rational Emotive Behaviour Therapy	Based on cognitive and behavioural psychological theories. Clients are helped to replace negative irrational thoughts, which impact on feelings and behaviour, with rational thoughts and assumptions. (REBT is similar to Cognitive Behavioural Therapy.)
Solution Focused Brief Therapy	Based on positivity and identifying solutions. Rather than exploring problems, clients are encouraged to focus on positive change. As few as 3-6 sessions may be needed to achieve positive outcomes.
Transactional Analysis	Incorporates person centred, cognitive and psychodynamic aspects. Helps clients understand the roles they adopt when interacting with others. The approach can be helpful in addressing difficult work and personal relationship issues.

1.3.2 Facilitating change

The supportive approach is based on the belief that the person seeking help has within them the personal resources to overcome their difficulty. For counselling to be effective, the person seeking assistance needs to actively engage in the counselling process and be willing to consider changes that enable them to overcome obstacles and move on with their life in a meaningful way. Counselling helps the person gain insight and resolve their difficulties through examination of thoughts and feelings. The counsellor may help the client to examine in detail their behaviour or situations which are proving troublesome and help the person to find an area where it would be possible to initiate some change. By exploring options and discussing possible solutions, the person may also develop a cache of skills and strategies that they can employ in the future to manage and overcome similar problems.

1.4 Coaching

A coach is also seen as a facilitator assisting clients to be responsible for their own goals and identify their own solutions (Bresser & Wilson, 2006). The popularity and provision of coaching has evolved steadily over the past hundred years (see Chapter 2). Early approaches to coaching were directive and entailed a knowledgeable authoritative coach teaching or training a coachee to improve performance or acquire skills (Parsloe, 1995). This approach to coaching is frequently seen to be similar to mentoring. Indeed, in the past coaching has been strongly associated with mentoring and often, when supporting the development of individuals within the workplace, the terms are used synonymously (Kutlilek & Earnest, 2000). However, there are some important differences between the developmental approaches. A mentor is generally perceived to be an expert within their field that offers guidance to a protégé to help them gain knowledge and skills (Green & Grant, 2003). Facilitative coaching, on the other hand, emphasises the egalitarian relationship and the collaborative process of working with the client. As with counselling, the strength of the relationship and facilitating change is fundamental to coaching. Indeed, it

could be argued that coaching has many aspects in common with counselling.

Coaching may be seen as a way of helping people to increase awareness, improve performance and develop new skills. The coaching approach also emphasises the collaborative relationship between coach and client which encourages personal growth and development (Grant & Stober, 2006). The coaching process aims to raise awareness and encourage the client to take responsibility for identifying and achieving their clearly defined goals (Ives, 2008). The coach provides motivation, questioning and extrinsic feedback (Megginson & Clutterbuck, 2005).

In contrast to the social imperative that underpins counselling, coaching is portrayed as a way of applying theory to practice by implementing knowledge of human development and understanding of underlying mechanisms of change (Grant, 2006). As coaching has grown and evolved, the approach has been influenced by various disciplines such as counselling, mentoring, education and consultancy (Grant & Zackon, 2004; Whybrow & Palmer, 2006; Passmore, 2013). As a consequence, the coaching industry has adopted a variety of pragmatic resources and psychological methodologies to inform practice and help clients identify solutions (Ives, 2008). Indeed, coaching approaches also incorporate many of the psychological approaches applied in counselling (see Table 1). These approaches include behavioural coaching (Passmore, 2007); cognitive behavioural coaching (Palmer & Williams, 2013); existential coaching (Spinelli, 2010); gestalt coaching (Allen & Whybrow, 2007); person centred coaching (Joseph & Bryant-Jefferies, 2007); psychodynamic coaching (Lee, 2010); and solution focused coaching (Grant, 2006).

1.4.1 Defining Coaching

Whilst many readily engage with coaching, at the current time there is no agreed definition of the helping approach. Some definitions appear to reflect the similarities between counselling and coaching, highlighting the

shared aspects of collaborative dialogue, seeking change and personal development:

“Coaching is a managed conversation that takes place between two people; aims to support sustainable change to behaviours or ways of thinking; focuses on learning and development” (Van Nieuwerburgh, 2014, p.5).

In contrast, other suggested coaching definitions strive to differentiate the helping approach and focus on the positive benefits to client’s skills development, personal growth, enhanced performance or improved well-being. This is reflected in definitions related to learning and reaching potential:

“Unlocking people’s potential to maximise their own performance. It is helping them to learn rather than teaching them” (Whitmore, 2002, p.8).

“Empowering people by facilitating self-directed learning, personal growth and improved performance” (Bresser & Wilson, 2006, p.10).

Rather than focusing on overcoming problems, other coaching definitions emphasise the positive aspects of identifying solutions and achieving goals:

“Coaching can be defined as a collaborative, solution focused, results orientated and systematic process, in which the coach facilitates the enhancement of performance, life experience, self-directed learning and personal growth of individuals and organisations.” (Grant, 2006, p.73).

Goal orientated coaching aims to improve performance (Hall, Otazo & Hollenbeck, 1999; Grant & Cavanagh, 2004; Bresser & Wilson, 2006) by encouraging identification of a goal in conjunction with the coach (Zeus and Skiffington, 2000), development of an action plan to achieve the goal; monitoring progress towards the goal; and providing feedback to the client.

The client is also encouraged to reflect and identify their own strategies for future improvement (Green and Grant, 2003).

Developmental coaching adopts a holistic, client centred approach to encouraging personal growth (Grant & Cavanagh, 2004; Cox, Bachkirova & Clutterbuck, 2010). Rather than seeking short-term solutions, the developmental approach seeks to enhance self awareness and help a person overcome long-term behavioural problems that may have inhibited personal growth (Bachkirova, 2011).

“[Coaching is] a human development process that involves structured, focused interaction and the use of appropriate strategies, tools and techniques to promote desirable and sustainable change for the benefit of the coachee and potentially for other stakeholders” (Cox, Bachkirova and Clutterbuck, 2010, p.1)

“[Developmental coaching] needs to involve not mainly helping clients to achieve their full potential at work or improving their performance in specific areas, but also enabling them to make conscientious decisions, understand their values and beliefs, take appropriate risks or discover their purpose.” (Cox & Jackson, 2010, p.220)

As people enhance their performance and learn new skills, it could be argued that they also develop greater self esteem and confidence (Cox & Jackson, 2010). Developmental coaching could, therefore, be seen as an organic progression from goal focused performance coaching (ibid.) Indeed, the inclusion of personal development strategies to encourage the growth of the whole person may suggest that the previously dominant goal focused coaching model has been superseded by a more inclusive developmental paradigm (Ives, 2008).

Both coaching and counselling work with client's personal values; are client centred; listen and reflect; help clients reflect on potentially harmful thoughts and behaviours; accentuate strengths and weaknesses; focus on

personal development. Indeed, many of the skills and attributes of practitioners would appear to be similar (Griffiths & Campbell, 2008).

1.5 Similarities and differences

Counselling and coaching use specialised skills to help individuals explore and develop creative solutions to address problems and make a positive change (Popovic & Boniwell, 2007; Egan, 2010). Whilst sharing many commonalities with counselling, the coaching industry has endeavoured to define specific areas of practice that reflect the unique activities and value that coaching provides, to show the differences between counselling and coaching approaches (Bluckert, 2005; Grant, 2003).

1.5.1 Homogenous Counselling

Attempts to distinguish between the two 'helping' approaches frequently focuses on presenting an amalgamated form of counselling that does not accommodate the different models applied in counselling (Parsloe & Wray, 2000). The homogeneous approach to describing the profession assumes some generalised features that are meant to apply to all practitioners. However, there are multiple approaches to practice in both disciplines (a selection of approaches are shown in Table 1) (Lane, 2010). For instance, when stipulating differences, counselling is frequently portrayed as dealing predominantly with the past, whilst coaching is interested in addressing current issues and working towards future benefits (Bluckert, 2005; Grant, 2006). However, the focus of the approach may depend on the type of therapy offered by the counsellor. For instance, psychoanalysis concentrates on the past, whereas cognitive behavioural therapy and brief solution focused counselling tend to work more in the present and may be directed to the future goals. In reality, each practitioner adopts idiosyncratic ways of working with individuals, based on the theories and methodologies that they are qualified to deliver (Bachkirova, 2007). Furthermore, it is unlikely that coaching work will always be future focused or solely address the healthy issues of a person's life. Kemp (2005) suggests that reflection on the client's past provides valuable insight into

current behaviour and future development. Simons (2006) argues that, in order to deliver effective coaching outcomes, it is necessary for coaches to appreciate how the client's past experiences and behaviour impact on their present circumstances and actions. Simon's research (2006) indicated that coaching clients "were emphathetic" and that an understanding of self awareness, self-knowledge and self-acceptance was fundamental to make the changes necessary within the coaching intervention. Simons (ibid), therefore, recommends that coaches undertake some form of counselling training to gain knowledge of how to work with the difficult issues of past, attitudes, beliefs, emotions and 'self-concept' and develop an understanding of when to refer clients.

1.5.2 Meeting the Client's Needs

Meeting the client's needs is a fundamental goal of both helping approaches. Counselling claims to be remedial in nature, emphasising diagnosis and healing (Bachkirova & Cox, 2005), while coaching is frequently described as focused on strengths and achievements (Zeus and Skiffington, 2000). Whereas raising awareness in counselling could refer to helping a person become more conscious of emotions and reactions, in coaching raising awareness tends to be similar to mindfulness and becoming aware of current circumstances and consequences of actions (Grant, 2007).

Coaches state that coaching addresses a need within a client, or the client has certain qualities, such as a willingness to engage in problem solving (Berg & Szabo, 2005), which makes coaching particularly relevant or applicable. By doing so, they perhaps lead people to erroneously infer that counselling wouldn't equally be able to fulfil these criteria.

1.5.3 Relationship

Helping relationships are based on trust and confidentiality. Within counselling, confidentiality is seen as implicitly fundamental, whereas in coaching confidentiality may need to be negotiated in an organisation where there may be a tripartite relationship between coach, client and

organisation. However, this suggested difference may not be as straightforward as it seems as confidentiality in counselling may not be contained within a dyad, as the counsellor may discuss issues during supervision (Bluckert, 2005; Spinelli, 2008).

Within helping approaches, the relationship between the helper and the client has been found to be one of the most significant factors in bringing about change in the client (Casement, 1985; Martin, Garske & Davis, 2000; De Haan, 2008a; McKenna & Davis, 2009). Both counselling and coaching approaches are based on trust and collaboration and incorporate interpersonal skills, empathy, warmth, congruence, goals and tasks. Each of these aspects has been shown to make a substantial contribution to the outcome of both therapy and coaching (Lambert & Barley, 2001; O'Broin & Palmer, 2006).

Additionally, many differences have been suggested in the dynamics of the counselling and coaching relationships. For instance, counsellors are described as composed, reflective and reflexive, while coaches are portrayed as pro-active and energetic (Whitmore, 1997; Bluckert, 2005). Further, it has been suggested that adherence to ethical boundaries and limited self-disclosure in counselling may affect the perceptions of power and expert status in the relationship. In contrast, coaching has been presented as more flexible, more collegial and more egalitarian (Zeus and Skiffington, 2000; Grant & Cavanagh, 2004) with less need for self disclosure by the client (Saporito, 1996).

1.5.4 Purpose

The expectations and purpose of coaching and counselling are specified in contracting for services. Spinelli (2008) points to potential differences in contracting and environmental flexibility. Counselling contracts are frequently described as flexible and focused on providing a number of confidential sessions in an agreed safe environment. Within coaching, the contract is thought to be more specific in regard to setting expectations, limitations, roles and commitment.

1.5.5 Flexibility

The difference in the flexibility of support offered by counsellors and coaches is also a subtle but unrecognised issue (Baker, 2013). Coaches may be impeded by the limitation imposed by organisations, emphasising specific areas for development. Counsellors, on the other hand, are directed by the individual client needs and may, therefore, be able to offer support in many complex areas.

In addition, the place where meetings take place can be more flexible and can be changed from face-to-face to telephone or email interactions. The limited time-scale of coaching, as a pre-determined period to achieve results, may be specified in the contract. The contract can, of course, be extended if this is desired by both parties (Maxwell, 2009). There also appears to be a historical or fictitious belief that counselling is not time limited or can continue indefinitely (Zeus & Skiffington, 2000; Bluckert, 2005). This is certainly not the case with many counselling approaches, or counselling provided by the NHS, which are limited to a specific number of sessions.

1.5.6 Mental Health

The psychological well-being and mental health of the client is possibly the most contested boundary or difference discussed between the disciplines. Grant (2000, 2004) suggests that coaching primarily works with the healthy, fully functioning population, whereas counselling helps the mentally ill and dysfunctional population. The dominance of the medical model of mental health discussed in Chapter 2 has given the coaching and counselling debate some structure for differentiation agreement (Buckley, 2007).

One of the central tenets of coaching is that the approach works with healthy, non-clinical populations. Coaching assumes that the client has no serious mental illness (Grant, 2006). However, identifying coaching as only working with healthy, non-clinical populations has also been recognised as problematic for ethical and practical diagnostic reasons.

Individuals do not come discretely packaged and often bring a variety of blocks, defences and behaviours that restrict their growth and optimisation (Egan, 2010). As a consequence, people's needs often do not fit neatly into either counselling or coaching. For instance, it is possible that counselling professionals may encounter individuals that express a desire to develop and achieve goals beyond addressing problems and distress.

Many coaches do not have a background in psychology or behavioural science (Grant & Zackon, 2004). Instead, coaches who have limited training may tend to use one-size-fits-all methods that are not based on theory or evidence (Kauffman & Scoular, 2004). As discussed in Chapter 2, the concept and definition of mental health is still subject to considerable academic debate. Defining mental health as two distinct poles of good and bad is widely disputed and debated within the medical profession, let alone within the 'helping through talking approaches' (Bachkirova, 2007). Rather than being seen as polar opposites, mental health appears to fluctuate on a continuum (Keyes, 2005). As a consequence, an individual may slide up and down the scale over a period of time and in ways that may not be immediately apparent (Buckley & Buckley, 2006).

It is, therefore, not enough to say that coaching only applies to clients where no dysfunction is evident. Indeed, people may choose to engage in therapy to increase well-being and personal growth as well address distress. It could be suggested that counsellors are equipped to manage the entire spectrum of mental health, whereas coaches, due to limited training and therapeutic skills are ethically only able to offer services to half of the spectrum. The difference in abilities introduces challenging ethical dilemmas for practitioners as, a person may avoid confronting significant personal problems through engaging in performance coaching could be seen as demonstrating pathological behaviour. Indeed, Berglas (2002) suggests that coaching may be seen as an alternative to

counselling by male executives who wish to avoid the stigma of mental health issues or appearing vulnerable.

Due to the difficulty in understanding a client's motives in seeking coaching, concerns have been raised about causing harm to clients who may have undiagnosed mental health problems (Berglas, 2002; Cavanagh, 2005). Research has shown that 25-50% of clients who took part in life coaching studies had issues that indicated mental health problems (Spence & Grant, 2005; Green, Oades & Grant, 2005; Grant, 2006). Indeed, clients may seek coaching to avoid the stigma associated with counselling and therapy (Spinelli, 2008).

Importantly, coaches need to be confident in their ability to work with the issues the client brings to the session. The coach's capacity to assess the mental health of the client (and possible referral to other professionals) is dependent on the training and experience (Buckley, 2006). However, few coaches receive training or have the experience to manage mental health problems.

1.5.7 Knowledge and skills

Arguably, the main difference between the approaches lies in the extensive training that counsellors undergo (Bachkirova & Cox, 2005). Whilst counselling training is regulated and incorporates reflective practice and supervision (Lane & Corrie, 2006; Strawbridge & Woolfe, 2003), the coaching industry has yet to establish recognised professional standards, enforced adherence to ethical principles or regulation of qualifications (Gray, 2011).

There are significant differences between disciplines in the provision of training programmes and professional standards for coaching and counselling practitioners. Whilst accredited counselling training can last many years and includes personal development and supervision, coaching education can be inconsistent. Many coaching courses are aimed at professionals who have gained tacit knowledge from a variety of

disciplines and are looking for a profitable change of career (Cross & Watts, 2002; Hall, 2009). As a result, coaching courses range from Masters and Doctorate Degrees in Coaching Psychology to Internet-based training lasting a few days (Hall, 2009).

The variability of coach training has resulted in marketplace confusion (ICF, 2012). As a consequence, buyers of coaching services are beginning to ask coaches to specify their qualifications and demonstrate accreditation by professional bodies (Hall, 2009). Potential coaches have therefore begun to recognise the benefits of university-accredited qualifications and courses that can demonstrate accreditation by professional coaching bodies (Hall, 2009).

However, the apparent confidence placed in accreditation may be misplaced. It could be argued that the quality and reliability of coaching is determined by the quality of training and the strength of the methods that are utilised (Grant, 2008). At the current time, there is no independent quality review process to evaluate criteria for course accreditation. Accreditation processes and ethical frameworks have been established by professional bodies to reassure organisations of the effectiveness and competence of professional coaches (Lane, Stelter & Stout-Rostron, 2014). The accreditation systems incorporate criteria for core skills and frameworks for practitioner development. Each professional body determines the content of training courses for their individual accreditation routes (Hall, 2009; Bachkirova & Lawton Smith, 2015). However, endeavouring to establish which coaching skills, abilities and qualities are needed for an evolving industry is challenging.

The accreditation criteria identified by professional bodies may primarily be informed by experienced practitioners who have qualifications from other professions. The people responsible for determining accreditation criteria may not have undertaken any specific coach training themselves, but learnt from experience, observing others and reflecting on practice (Cranton & King, 2003). Therefore, instead of incorporating robust

theoretical knowledge and evidence from recent coaching research, the perspectives may be aligned to a combination of skills gained from different backgrounds (Bachkirova & Lawton Smith, 2015). Consequently, without a standardised independent accreditation process for training courses, coaches have been free to establish practices without the constraints of agreed ethical guidelines, established core competencies or professional development practices that other helping professions adhere to (Spence, 2006).

Indeed, it would appear that for every suggested difference, there is an argument that would indicate that the boundaries are not as clear or robust as originally implied. It is therefore questionable how rigorously and consistently the suggested limits are applied in practice (Price, 2009; Jinks, 2010). Indeed, recent research (Maxwell, 2009; Price, 2009) and conference debates (Hall, 2012) have suggested that, rather than clearly demarcated areas of practice, many coaches rely on personal experience and understanding to idiosyncratically define boundaries rather than observe theoretical boundaries. Therefore, although coaches clearly believe that there are differences between coaching and counselling, explanations of where the boundaries lie are inconsistent and fuzzy (Maxwell, 2009; Price, 2009).

The difficulty in identifying boundaries would seem to have significant implications for novice coaches and those without a psychological background. Without the advantage of professional skills or contextual knowledge to assist with identifying boundaries, it is important that newly trained coaches are aware of working within their competencies and the potential to cause harm to vulnerable clients.

Few empirical studies have investigated how the boundaries are identified, managed and applied in practice by counsellors and coaches. A review of studies that have investigated counsellors' views of the differences between coaching and counselling (Hart, Blattner & Leipsic, 2001; Skerten & Campbell, 2006; Jopling, 2007; Griffiths & Campbell, 2008; Jinks, 2010)

and organisational coaches' experience of working with the boundary between therapy and coaching (Maxwell, 2009; Price, 2009) is included in Chapter 2. However, there would seem to be a dearth of research that has incorporated the opinions of both counsellors and coaches to investigate whether clear boundaries are agreed between the disciplines. Additionally, there seems to be an absence of research that reflects the dilemmas of newly trained coaches when trying to identify boundaries between coaching and counselling.

1.6 Aims and Objectives

In order to develop an understanding of coaches' and counsellors' experiences of working with the boundaries between coaching and counselling in practice, the research aimed to investigate:

1. Novice coaches' perceptions of the similarities and differences between coaching and counselling.
2. Novice coaches' experiences of identifying and managing boundaries between coaching and counselling in practice.
3. Experienced coaches' and counsellors' perceptions of the similarities and differences between the helping approaches, and identification and implementation of boundaries in practice.
4. Experienced coaches' and counsellors' experience of working with the boundaries between coaching and counselling.

To provide breadth and depth, the research programme addresses questions from both a quantitative and qualitative perspective and emphasises a reflection-in-action and reflection-on-action approach to research (Schon, 1983; Strawbridge & Woolfe, 2003) to gain a deeper understanding of the issues and complexities of practice that practitioners encounter when working with clients.

The programme of research also took into consideration the argument that academics conducting research within coaching could contribute to an academic-practitioner divide, which may potentially cause discord within

the discipline (Passmore & Fillery-Travis, 2011). To address these concerns, I adopted a methodology that could provide accessible results that reflect the phenomenological experience of practitioners. As a consequence, all of the quantitative studies are reported in percentages rather than statistical figures, which may require interpretation. Further, by utilising interpretative phenomenological analysis to analyse the qualitative studies, it could be argued that the practitioners' idiosyncratic concerns and experiences can be utilised to inform knowledge and recommendations.

It has been proposed that the way in which professional bodies determine the factors that differentiate experienced practitioners from the novices will influence coach education programmes and continued professional development training in the future (Passmore & Fillery-Travis, 2011). Further, Spence, Cavanagh and Grant (2006) have suggested that research is important to find out what needs to be included in coach training and what skills would make a difference when coaching others.

Therefore, the work presented in the thesis is based on sequential mixed method studies to enable a comparison of the perspectives and abilities of novice and experienced practitioners. The qualitative studies in the mixed methodology used recognised techniques to inform understanding of practice dilemmas and interactions at a fundamentally deep level. In addition, mixed method research triangulates both qualitative and quantitative data to provide multifaceted understandings (Passmore & Fillery-Travis, 2011).

The programme of research, therefore, drew upon the findings of quantitative, qualitative and mixed methods designs to examine, analyse, interpret and represent coaches' and counsellors' experiences of working with boundaries in practice. The objectives of the studies were:

- To explore novice and newly trained coaches' understanding of the similarities and differences between counselling and coaching;

- To investigate novice and newly trained coaches' confidence in identifying and managing the boundaries between coaching and counselling in practice;
- To investigate experienced counsellors' and coaches' perceptions of similarities, differences, boundaries and decision-making when working with the boundaries between coaching and counselling in practice;
- To explore practitioners' reported experiences of working with the boundaries in practice.
- Provide evidence of key issues related to practice as experienced by novice and experienced practitioners.

The next section provides a brief overview of the thesis.

1.7 Thesis overview

This thesis is presented in six discrete chapters. This first chapter considers descriptions of coaching and counselling helping professions. The similarities and overlap between the approaches is discussed and the aims and rationale for this research programme are presented. Chapter 2 develops this short introduction by presenting the historical and social factors that have underpinned the 'helping through talking approaches'. Chapter 2 also reflects on the concepts of mental health and stigma. The development of the counselling approach following the Second World War will be explored and the influence of counselling psychology and the challenges of combining practice and research will be considered. The growth of the coaching industry and movement towards maximising potential true positive psychology will also be discussed. The contribution of coaching psychology in the drive to demonstrate evidence based practice will also be considered. Proposed boundaries between coaching and counselling will be examined, and research into counsellors' views on the similarities and differences between approaches; and coaches' experiences of working with boundaries in practice will be discussed.

Chapter 3 reports the findings from the first study in the programme of research. The mixed methods study investigated newly trained coaches' views relating to the differences and similarities and the boundaries between coaching and counselling in practice. The results indicated inconsistencies relating to definite areas of practice and core mental health criteria for clients. Confidence and concerns about managing the boundary between approaches in practice were apparent in many novice and newly trained coaches' reports. Whilst the sample size was small, the findings are important, as they illustrate realistic concerns and reflect key issues about commencing practice and working within competencies post training.

Interpretative phenomenological analysis of novice and newly trained coaches' interviews identified superordinate themes of boundaries and knowledge. The narrative accounts expanded upon the discrepancies highlighted in the quantitative study. Novice coaches indicated a need for psychological frameworks to structure practice and enhance confidence when commencing independent practice. In contrast, newly trained coaches with more experience discussed their desire to work with intuition. Chapter 3 concludes with a discussion of inconsistencies and confusion shown by novice and newly trained coaches. Whilst participants felt there were boundaries between coaching and counselling, they found them hard to identify and provided conflicting accounts in their narratives. Further, a willingness to work beyond competencies with mental health issues was apparent from the results of the quantitative survey.

Whilst Chapter 3 focuses on preconceptions of novice and newly trained coaches, Chapter 4 explores the opinions of experienced practitioners. In order to gain an understanding of how practitioners' beliefs change over time, experienced counsellors, counselling psychologists, coaches, internal coaches, coaching psychologists and occupational psychologists were surveyed to gain a greater understanding of how experience influences perceptions of boundaries and confidence in managing

boundaries in practice. The findings indicated a high level of education in experienced coaches and counsellors. The practitioners appeared to use their knowledge and experience to recognise boundaries in practice and identify mental health issues. The experienced practitioners indicated more inconsistencies in their opinions regarding the similarities and differences between approaches. In addition, there also seemed to be confusion relating to how difficult boundaries are to identify, with a third of respondents reporting that they felt that coaching and counselling approaches should be integrated. Content analysis of open text comments revealed concerns relating to coaches' ability to identify and manage mental health problems and public perceptions of mental health and how this impacted on the choice of helping approach.

Chapter 5 builds on the findings from the quantitative survey and provides an in-depth understanding of practitioners' experience of identifying and managing the boundaries between coaching and counselling in practice. The chapter reports the findings from a qualitative study of 20 counsellors and coaches. It presents the key themes from the interpretive phenomenological analysis derived from each interview transcript and uses quotes from coaches and counsellors to illustrate the interpreted themes. The superordinate themes of boundaries, differences, relationship, knowledge, self-awareness and ethics expand upon the findings from Study 2 and demonstrate how experience and skills development influence opinions and perspective.

Chapter 6 summarises the findings from the research programme and considers the implications from each of the studies. Minimum standards of training, supporting coaches in assessment of mental health, developing practice experience to enhance intuition, providing ethical guidelines for practitioners who wish to integrate helping approaches in practice, and the fundamental benefits of regular supervision are also considered. The chapter focuses on the strengths and weaknesses of the programme of

research, suggests future research directions and considers the original contribution from the mixed-method programme of research.

1.8 Conclusion

This chapter has shown how coaching and counselling aim to support individuals and help them to overcome their problems. Whilst discrete boundaries have been proposed between the helping approaches, in practice it would appear that the boundaries are difficult to identify due to the similarities of approaches and skills used to assist clients. Reflecting on the difficulties of identifying and managing boundaries in practice, this chapter has introduced the overall aims and objectives of this programme of research and presented a concise summary of each chapter in the thesis. The following chapter will reflect on the historical and social context of helping approaches and extend the discussion of the overlap between coaching and counselling. The influence of the social context of helping approaches will be reflected on and previous research into practitioners' perspectives will be examined.

Chapter 2 The Evolution of Counselling and Coaching

2.1 Introduction

The previous chapter introduced the thesis and presented a rationale for the research programme. Coaching and counselling were discussed and the overlap between the helping approaches was reviewed. This second chapter aims to develop the discussion of coaching and counselling presented in Chapter 1 by broadening the understanding of the historical and current context. To achieve this aim, the chapter is divided into two sections. The first section draws on sociological perspectives to provide an understanding of the historical context for the development of helping approaches. In addition, to situate the research in the current context, the second section examines the few studies that have investigated counsellors' views of transitioning from counselling to coaching and coaches' experiences of working with the boundary between counselling and coaching.

2.2 Part One – The Emergence of Helping Professions

Throughout history, people have relied on the support of family and local communities to help overcome difficulties and problems in their lives (Egan, 2010). Traditionally, people who experienced transitory problems sought advice and assistance from parents, family members and village elders. More prolonged problems or mental distress, on the other hand, were believed to be a sign of spiritual unrest. The clergy, therefore, offered moral support and religious guidance to assuage the anguish (Howarth, 2007; Kellehear, 2007). The wider community also played a role in caring for people who experienced psychological problems. Whilst families often shouldered the burden of care for individuals with long term mental health difficulties, many towns and villages accepted those who had struggled and provided “alms” for a short time (Porter, 2002; Scull, 2011).

However, the role of community, in supporting and caring for individuals, was significantly changed in the eighteenth and nineteenth centuries due to widespread industrialisation. As people moved from their rural

communities to gain employment in new factories, social networks were dissolved and the shared meanings of local communities were lost (Cushman, 1990; Howarth, 2007; Kellehear, 2007). The loss of a community resulted in the absence of social structure and community support in times of need (Walter, 2003). Families were no longer able to support people who had mental health problems. Instead, mental distress was seen as something to be managed; mental problems became the responsibility of the state.

The rapid expansion in industrialisation had been made possible by scientific advances during the age of enlightenment. The zeitgeist of the scientific age was the belief that the world could be understood in a consistent, objective and measurable way (Cushman, 1990). As a result, society embraced the positivistic science approach which focused on gaining knowledge from empirical observation, based on logic and statistical deduction (Bentall, 2004). These beliefs and objectives had a profound impact on the way that mental distress was conceptualised and supported. In keeping with the impetus of the times, society relied less on the explanations and guidance offered by religion, instead embracing the secular authority of science (Foucault, 1965; Scull, 2011). As a consequence, mental disorders were no longer seen as a signifier of spiritual struggle or difficulty in adjusting to the world, but medicalised and relabelled dysfunction or pathology.

To develop a greater understanding and classification of mental illness, psychiatric medicine developed a classification system to aid with the diagnosis of 'mental disease'. Whilst psychological functioning is often idiosyncratic, biological science offered a means to identify behavioural changes and observable signs of diseases. The classification system was therefore based on the premise that symptoms of mental disorder are biological, rather than informed by personal psychology, and could be categorised into discrete categories for diagnosis (Bentall, 2004; Laing, 2010). As a consequence, doctors routinely carried out 'interrogations' of

patients to determine a diagnosis, based on scientific knowledge and observable signs (Moynihan, 1993).

However, detractors questioned the reliability of the classification system and argued that mental illness does not conform to the traditional concept of disease or illness (Szasz, 2010). Instead of being comprised of physical components, thoughts and behaviour are driven by experience emotions, motivation, and meaning, (Bentall, 2004; Barker, Vossler & Langdridge, 2010; Laing, 2010). These abstract concepts are difficult to quantify organically. Therefore, some would argue that medical classification of illness or analogies to biological processes may not be relevant (Laing, 2010).

As comprehension of mental disorder remained intangible and medicine had no clear understanding of how to treat the mentally ill, treatment in asylums in the early twentieth century was often experimental and, at times, barbaric (Bentall, 2004; Scull, 2011). As a consequence, the occurrence of mental ill-health became shrouded in fear, with few willing to freely admit that they experienced psychological problems or had succumbed to mental 'weakness' (Scull, 2011).

2.2.1 Mental ill-health and stigma

For some time, observations have been made that people labelled as mentally ill are treated differently within society once they have been classified (Goffman, 1963). People tend to respond strongly to attributes which are perceived as threatening to social norms (Smith, 2002). As a consequence, they may apply a negative social label to an individual who is believed to have undesirable attributes in an attempt to create separation between 'us' and 'them' (Link & Phelan, 2001). In the middle of the twentieth century, people experiencing mental ill-health were negatively labelled as 'deviants' as their behaviour was perceived to be outside of social norms (Lemert, 2000; Falk, 2001; Scheyett, 2004).

Having deviant status was highly stigmatising for people who experienced mental health problems (Lemert, 2000). Indeed, individuals who are labelled as mentally ill tend to be stigmatised more acutely than those with physical health conditions (Corrigan et al., 2000). Link & Phelan (2001) suggest that stigma is created by a process dependent on social, economic and political power. The word 'stigma' originates from Greek and means the mark or label that is put upon someone to signify discredited or inferior status (Scheyett, 2004). The labels lead to the creation of negative stereotypes (Goffman, 1963). Stereotypes are efficient means for categorising groups of people, which may subsequently lead to discrimination, distancing, exclusion and rejection (Link & Phelan, 2001; Corrigan, 2004). Individuals with mental health problems may be stereotyped to provide differentiation from others. Differentiation allows a distinction to be drawn between the in 'us' (the in group) and 'them' (the stereotyped outsiders) when boundaries between groups are tenuous. For instance, differentiating between 'us' who are well and 'them' who experience mental health problems could help to reduce the anxiety and fear that mental health problems could happen to anyone (Tajfel & Forgas, 2000).

Research has repeatedly demonstrated the negative impact that stigma can have on people's lives (Link & Phelan, 2001). The discrimination and prejudice individuals experience often has a detrimental effect on a person's self concept and opportunities to achieve personal goals (Corrigan, 2004). The negative effects are further compounded when stigma is internalised, affecting social behaviour and self-efficacy which, in turn, may trigger feelings of lower self-worth and shame (Corrigan, 2004).

Stigmatising an individual can also have a dramatic effect on their relationships and employment prospects (Link & Phelan, 2001). Studies have shown that people with mental health problems are generally believed to be hard to talk to, unpredictable and different in some way. These beliefs may lead to social distance from others (Crisp et al., 2000).

However, the social distance and difficulty talking to others could be a related to the stigma associated with mental health. Individuals may fear the negative reactions of partners, friends, neighbours, and employers. Recent research into public attitudes towards mental health would appear to show that these fears may be justified, with 40% indicating they would not be willing to live with someone who had a mental ill-health and 25% of people surveyed indicating they would not be willing to work with someone with mental health problems (Time to Change, 2013). As a result, they may seek to avoid interactions with others for fear of negative judgement and rejection (Link & Phelan, 2001).

This would appear to show a profound change in support for psychological problems. Whilst people had previously sought support from the community, many may conceal their difficulties and actively avoid sharing their mental health concerns to avoid the stigma associated with mental health (Corrigan, 2004). It is therefore not surprising that, in a recent survey, 27% of those with mental illness reported that they would not be comfortable talking to friends or family about their problem. Further, 55% claimed they would not discuss their mental health problem with their employer (Time to Change, 2013).

As a result of stigma, and not feeling able to share their psychological problems, people may suffer from decreased self-confidence and diminished self-esteem (Corrigan, 1998). Additionally, if people do not address their difficulties, important issues can remain unresolved, which could lead to lasting anxiety, guilt and anger (Hacking, 1999).

2.3 Social change and personal crisis

Counselling as a profession emerged at a time of political and economic change during the 1940s (Feltham, 2007). Following the Second World War, the nation was seen to be experiencing a social crisis and a cultural shift, as returning soldiers found it difficult to adjust back into their marriages and family life (McLeod, 2009). This was coupled with women's dissatisfaction at returning to the role of homemaker and housewife after

making contributions to the workplace in factories and farming. The need to increase productivity to enhance economic growth with a depleted workforce added further pressures. In urban towns and cities, individuals lacked the emotional support system they may have experienced previously by their communities to help them cope with stressful situations or transitions in life. As a result, studies conducted at the time found minor mental health issues of anxiety and depression were common (Moynihan, 1993).

The term 'counselling' was introduced by Carl Rogers in 1948 to describe the 'Helping through talking' approach, which underpins his humanistic person-centred approach to therapy (McLeod, 2009). In contrast to psychoanalysts, who adopted the role of interpreter in their relationships with clients, and behaviourists, who took an authoritarian role in helping people modify their behaviour, Rogers (1961) believed that individuals were the best experts on themselves. He suggested that by listening to people and demonstrating authenticity, congruence and unconditional positive regard, individuals would develop self awareness and be able to resolve internal conflicts to become their ideal self.

Counselling has also been informed by many other disciplines, such as art, education, theology, anthropology, philosophy and psychology (Bachkirova, 2007; McLeod, 2009). Although counselling is often perceived as similar to psychotherapy, the impetus and precursors to development of the approach are somewhat different. Rather than seeking to address or ameliorate pathology, counselling is primarily a social interaction based on the premise that the most effective way of helping individuals find a way forward is to sit down and talk about their situation, experiences and needs (McLeod, 2009).

Within the UK, counselling emerged from work in the voluntary sector (McLeod, 2009). The Marriage Guidance Council was founded in 1938 (Feltham, 2007) with volunteer counsellors to address marriage breakdown and discontent. In addition, pastoral counselling was set up for

the disenchanted youth in communities and universities (Dryden, Mearns & Thorne, 2000). The volunteers used qualities of compassion, listening, and understanding of personal experience to help people reflect on their 'problems in living' and find satisfactory resolutions. These skills and abilities drew on knowledge from caring professions such as nursing, social work, teaching and medicine that traditionally provide 'embedded counselling' as part of their role (ibid).

The social benefits of counselling were also acknowledged by the state. When the National Health Service was established in 1948, subjective medicine, which took into account the patients' attitudes, beliefs and behaviour, was incorporated in the provision of health care. In the 1960s, a greater awareness of the benefits of counselling and psychotherapy to help a person talk through their problems was acknowledged. During the 1970s, counselling was offered in the NHS (Moynihan, 1993) and in 2008 an Improving Access to Psychological Therapies (IAPT) initiative was launched in the UK to deliver National Institute for Health and Clinical Excellence approved therapies across the country (Department of Health, 2011) .

As counselling was primarily provided by volunteers and adopted disparate or creative approaches to offering assistance or guidance, there is still some confusion about what counselling really is. Further, the media is disingenuous in reporting the benefits of the approach (Mearns & Thorne, 2000). Impressions of counselling in the general public vary widely. Some view counselling as lying on a couch while a counsellor repeats back clichéd phrases, or as charlatans who suggest treatments that could possibly endanger the client. Whilst these images may have been manipulated by media portrayal of counselling, there could also be a degree of fear inherent in the perception of counselling (McLeod, 2009).

Whilst many value the support offered by counselling, a third of the population are critical of the approach and sceptical of its benefits (Anderson, Brownlie & Given, 2009). To counter the criticism, the

counselling bodies such as the British Association for Counselling and Psychotherapy and the United Kingdom Council of Psychotherapy have determinedly strived to demonstrate integrity by developing professional standards, implementing recognised training programmes and underpinning practice with stringent ethical code and practice guidelines (BACP, 2009). Whilst the helping approach was originally embedded in the voluntary sector, there have been significant moves towards accreditation and regulation.

Counselling courses incorporate counselling skills, psychological theory, counselling practice, professional development and personal development (Feltham, 2010). To support the counsellor's well-being, in an occupation that embodies active engagement in emotion focused practice, counsellors are expected to remain in supervision (Dryden, Mearns & Thorne, 2000). Whereas many would perceive supervision to be based on monitoring or control, counselling envisions supervision differently. Supervision within counselling is based on a respectful relationship based on empowering the counsellor to develop awareness and openly discuss practice issues or personal challenges (Dryden, Mearns & Thorne, 2000). With the inclusion of extensive personal therapy, personal development and ongoing supervision, many counsellors believe that the training for counsellors is more rigorous than counselling psychology training (ibid.).

However, conforming to professional standards has been met with much criticism. Some have claimed that, whilst enhancing the reliability of the approach, the authenticity, humanity and validity have been diminished and what once was a pioneering approach to helping others has lost its creativity and dynamism (Feltham, 2007).

2.3.1 Putting the psychology into counselling

Although counselling embraces many psychological frameworks in practice, the considerable influences from teaching, nursing and social work helped the approach develop independently from psychology until the early 1970s. During this period, various approaches aimed at

enhancing human potential were also integrated which encouraged group work and freedom of expression (Spence, 2006; Weigel, 2002). However, after initial excitement about the freedom and creativity of the practices had waned, many of the experiential activities were perceived negatively in academia and the media, leading to criticisms of lack of evidence to support effectiveness and unethical practice (Spence, 2006).

In contrast, psychologists may make a significant contribution to the field of counselling by implementing validated therapeutic concepts to help clients overcome problems and grow. Further, they can reflexively undertake scientific evaluation of practice to demonstrate effectiveness of the psychological approach, thereby building consumer confidence. To define what counselling psychologists offer that is distinct from psychotherapy and counselling, the British Psychological Society established a group to represent practitioners' interests in reintegrating counselling with psychology in 1989. In 1994, the group achieved full divisional status (Strawbridge & Woolfe, 2003).

One of the core aims of counselling psychology is to take a holistic view of human beings to enhance a person's self awareness and self determination, by offering knowledge and insights from psychological models, for people to use for themselves (Strawbridge & Woolfe, 2003). Instead of offering treatment for illness, counselling psychologists endeavour to meet the person as an equal in a therapeutic relationship, as a facilitator, helping them to find meaning in their reality and inner world (ibid.). Rather than 'doing something to' the person seeking help, the counselling psychologist focuses on 'being with' the individual.

Counselling psychology integrates a holistic humanistic approach to practice which values the subjective experience of each individual. This stance is often at odds with the objective positivistic position of natural science. Counselling psychology promotes the reintegration of philosophy, in particular humanism and existential-phenomenological philosophy, in order to gain a deeper understanding of self, interactions with others,

meaning making and perceived realities (Orlans & Van Scoyoc, 2009). Whilst there is undoubtedly an increased requirement to demonstrate evidence for practice, what constitutes that evidence and how the knowledge is presented, is fundamental to applying the research to relative context.

Counselling psychology is committed to humanistic values, reflective practice, ongoing supervision, personal development and values subjectivity within practice and research (Orlans & Van Scoyoc, 2009). As a result, the profession psychology has adopted the philosophy of reflection and reflexive practice to augment research in a meaningful way. Clients are encouraged to challenge and reflect on presenting difficulties (Orlans & Van Scoyoc, 2009).

2.3.2 Sliding scale of mental health

In an ever changing world, mental health can be perceived to be the ability to cope with everyday challenges and difficulties, drawing on personal resources and prior experience. Sometimes, this can entail talking about problems or making choices to take action to resolve issues. Mental health is frequently portrayed as the absence of psychopathology. However, for some time it has been argued that it is more than the absence of illness and suffering (Jahoda, 1958). Indeed, many individuals who have not been diagnosed with a mental disorder do not feel that they are content, healthy or function well (Keyes, 2005). The absence of pathology does not automatically indicate the presence of happiness. Although individuals were not suffering from psychological distress or mental illness, they equally did not appear to experience happiness, pleasure or engagement in life (Seligman, 2003; Peterson, Park & Seligman, 2005). Even those who experience mental illness want to achieve more than the absence of anxiety and distress. It could be argued that people would like assistance in attaining positive emotions and finding meaning. Well-being requires more than relief from distress and suffering. It is an independent process

that is developed and enhanced by utilising positive traits and strengths (Seligman, Park & Steen, 2005).

Mental well-being is influenced by the ability to achieve a balance between psychological, emotional, physical and social aspects of life (Keyes, 2005). When changes occur unexpectedly, people can feel challenged by negative cognitions and emotions. When the disturbance is prolonged or associated with threat or distress, a person's sense of well-being may be compromised as they struggle to cope with the situation. As a result, the person may exhibit signs of emotional turmoil or impaired functioning.

Instead of being viewed as dichotomous, mental health could be seen as maintaining balance in the psychological, emotional, physical and spiritual aspects of life. Mental health could alternatively be seen as a dynamic continuum ranging from distress to optimum functioning. Individuals may experience transitions in mental health that alter according to the challenges they encounter. As a result, 'normal' individuals may fluctuate on the scale between what may be considered positive and negative mental health in everyday life (Seligman, 2003; Bentham, 2002).

2.3.3 Growth of the coaching industry

Coaching appears to address a general need within Western societies for personal growth and development. Indeed, it has been suggested that the growth in popularity of coaching can be attributed to the fragmentation of social networks in Western society (Naughton, 2002; Spence, 2006).

Early coaching emphasised a similar model to mentoring. The coach was seen as someone who had a greater knowledge than the client and helped to direct them to appropriate solutions through telling & showing. Indeed, some models of performance coaching in other disciplines continue to draw on a directive approach to guide clients' growth and development (Downey, 2003)

The growth of the coaching industry has been well documented (Bachkirova & Cox, 2005; Spence, 2006; Grant, 2007) and is estimated to

be worth in excess of two billion dollars (Pennington, 2009). It is therefore understandable that people from a broad range of professions would endeavour to be at the forefront of a new phenomenon that presents valuable opportunities (Spence, 2007). The industry has attracted a broad range of practitioners from various backgrounds. This has led to a varied collection of skills and experience within the coaching industry.

The prolific growth has been encouraged by the absence of consistent regulation (Spence, 2007). Without standardised accreditation of training courses, coaches have been free to establish practices without the constraints of ethical guidelines, codes of conduct or established core competencies that underpin recognised professions (Gray, 2011). As a consequence, the coaching industry does not meet the core criteria for recognition as a true profession (Grant & Cavanagh, 2004; Spence, 2006; Williams & Irving, 2001).

In the past, coach training has been inconsistent and proprietary; indeed, some coaches do not see their practice as underpinned by theory (Jackson, 2005). There is a general acceptance that coaches can choose their own methods and practices, without being trained to a minimum standard. Many of the coaching training programmes demonstrate little connection to relevant psychological theories. Consequently, the quality of current coaching industry practices is questionable as, until recently, little evidence existed to support the empirical or theoretical basis of practice (Spence, 2006).

Coaching currently has no minimum standards for entry, no regulation of training, and no formalised over-arching accreditation system (Grant, 2006). It is therefore unclear whether coaches currently have an adequate or appropriate skill set to facilitate the development and growth in others that they desire (Spence, 2006).

2.3.4 Coach Training

Coaching is client centred and integrates many theoretical approaches. However, adopting an integrated approach presents significant problems for coach training. To become competent in a specific modality, the coach would need to be trained in the core principles and skills. Further, to be a truly effective practitioner, these tenets would need to be attuned to the coach's personal values and sense of self (Norcross & Halgin, 2005). In addition, to efficiently deliver coaching services that rely on an evidence base, coaches need to have an understanding of how the knowledge was procured and what it means in context. Without understanding research practices and critically analysing relevance, it would be difficult for practitioners to select and effectively deliver appropriate strategies to meet client needs.

Leaving the industry unregulated may be highly problematic. Consumers may become confused or disillusioned by the inconsistency of standards or the competence of the practitioner delivering the service. It would therefore seem advisable that the coaching industry adopt a policy of endeavouring to reach professional standard by aspiring to deliver best practice and work within trained competencies.

2.3.5 Evidence-based coaching

As coaches come from numerous disciplines, have varying degrees of experience, knowledge and address a wide array of issues, coaching needs to demonstrate rigour and credibility. Moreover, it needs to show a strong theoretical and empirical core. By implementing scientific methodologies and psychometric measures, psychology may be able to provide the evidence base for ethical practice that coaching is currently seeking (Seligman, 2007).

Psychology facilitates the adaptation of existing methodology and knowledge for development of individuals. It has been argued that the scientist-practitioner approach of psychologists, coupled with their expertise in human behaviour, qualifies them to take a principal role in

guiding the development of coaching as a profession (Brotman et al., 1998; Kampa-Kokesch & Anderson, 2001).

Coaching psychologists can offer important and beneficial insights into mental health, motivation, organisational growth and implementation of psychological models (Palmer & Cavanagh, 2006). From their training, psychologists have gained expert knowledge and understanding. The practice of using evidence from research to underpin practice is widely recognised as providing the most effective method of optimising coaching outcomes (Wampold & Bhati, 2004).

Further, psychologists bring trustworthiness to the coaching profession by providing empirically validated techniques and methodologies to help them enhance development and engender behavioural change. Some have enthusiastically pronounced coaching as a profession already (Williams, 2006). Rather than being helpful, such optimism may be counterproductive, as it fails to tackle important issues the industry need to address if it is to progress. Further, claiming the coaching industry is a profession, when it has yet to mature, undervalues its credibility to allied professionals who are aware of the current standing of coaching (Spence, 2006).

In reality, it would appear that the coaching industry has a long way to go to meet the criteria of becoming a profession (Lane, Stelter & Stout-Rostron, 2014). Perlman (2004) notes that establishing a profession entails reciprocal acceptance and agreement from both the community and the service providers. It is extremely important that the profession operates within regulations that protect societal welfare to protect consumers from unethical practice. Theoretically, for a profession to be established, the community needs to identify the benefits of the service provided. As a result, the industry is allowed to operate autonomously with self regulation and restriction of practice to qualified members. In return, the service industry agrees to ensure the ethical practice and competence of its qualified members. However, at the current time, it is difficult to

determine whether society sufficiently recognises the benefit of coaching to individuals and the wider community. As a consequence it is questionable whether the necessary social contract could be reached to achieve professional status for the coaching industry (Perlman, 2004).

Coaching psychology encourages purposeful change and performance enrichment in individuals, organisations and society. Clients that already have a positive experience with a psychologist may greatly appreciate the relationship being expanded to support them as they tentatively take steps from growth and reaching potential. However, people who have not worked with a psychologist previously may be confused between the professions of psychiatry and psychology (Webb & Spence, 1986). Therefore the client may not welcome a psychologist, who is perceived as working with mental illness, and the stigma that comes with working alongside them in a professional development capacity.

In recent studies, Turner (2010) found that coaches themselves doubted the advantage offered by psychology, claiming businesses who sought coaching services were more interested in the coach's experience than their use of evidence-based psychological knowledge. Prior to integrating scientifically validated psychological techniques in coaching practice, much of the coaching industry had embraced an inductive reasoning approach to verifying their assessments and coaching strategies. With such a diversity of backgrounds, all of which have contributed knowledge and deepened insight, no particular group of professionals can lay claim to the coaching industry. As a result the inclusion of psychology in coaching was seen by some coaching practitioners as threatening to their professional domain and some even viewed psychologists of seeking to poach valuable business (Grant, 2007).

2.3.6 Overlap between disciplines

Grant (2007) suggests that coaching psychology creates a connection between clinical, counselling, occupational, sports and health psychology. Indeed, studies have shown there is a significant overlap in the training

and competencies of many psychological disciplines that emphasise development, growth and reaching potential (Cobb et al., 2004; Maxwell, 2009; Price, 2009). In practice, many counsellors, psychotherapists and clinical psychologists integrate positive psychology and coaching techniques in their therapeutic approach to gently motivate clients who are 'stuck' in self defeating behaviour or encourage healthy development. Meeting the client needs does not represent making a choice between coaching and counselling; sometimes, it includes a pluralistic bringing together of approaches.

The vagueness of the boundaries suggested in literature has led to a frustration and misunderstanding by both coaching and counselling professionals. Whilst some in the coaching and counselling community remain resolute in the need to enforce boundaries and delineate practice (Grant, 2007), others claim that, in a relationship based on trust and understanding, practitioners should be allowed to utilise all their skills to the client's advantage. Indeed, it has been argued that, rather than seeing things as either/or, it may be more circumspect to view them as interconnected in a complex way, where one informs the other (Mumby, 2011). As a result, practitioners may wish to work with both approaches to help their clients (Popovic & Boniwell, 2007; Popovic & Jinks, 2013) or implement flexible contracting to meet their clients' needs (Baker, 2013).

The next section will consider the findings from previous research into counsellors' experiences of transitioning to coaching, and coaches' experiences of working with proposed boundaries.

2.4 Part Two – Understanding Practitioners' Experiences

It would seem that most of the literature relating to the boundaries between coaching and counselling has centred on theoretical suggestion and professional opinion. Indeed, there would appear to be little empirical research into how coaches and counsellors perceive the ethical and practical issues associated with managing the boundary in practice. Six studies focus on counsellors' experiences of transitioning to life coaching,

organisational coaching and executive coaching. In addition, two recent studies have investigated organisational coaches' experiences of working with the boundary in practice. This section will discuss the findings from these studies and consider how the outcomes inform this programme of research

2.4.1 Similarities and differences between approaches

It has been argued that counsellors believe coaching is just a different term for the helping approach that they offer (Bachkirova and Cox, 2004). Consequently, some therapists have considered augmenting their practice with coaching (Williams and Davis, 2002). As life coaching helps people identify aspects of their lives that they wish to improve, many counsellors have incorporated the coaching approach in their practice (Griffiths and Campbell, 2008).

Campbell and Griffiths (2008) identified interpersonal skills of listening, questioning and the person centred quality of being non-judgemental as significant factors in the practitioner-client relationship. Most of the studies indicated that both coaching and counselling encompass a broad range of approaches to helping clients, resulting in a significant overlap between the methods and approaches used in the helping approaches (Campbell, 2001; Hart, Blattner & Leipsic, 2001; Skerton & Campbell, 2006; Price, 2009).

Rather than identifying clear differentiation between coaching and counselling, practitioners felt that the helping approaches were far more homogenous (Maxwell, 2009) which, as Price (2009) argues, may complicate definition of a boundary between the disciplines (Price, 2009).

Counsellors who had moved to life coaching, viewed coaching as a positive strategy for helping people who want to move past coping to enhance growth and potential (Skerten & Chapman, 2006). In addition, counsellors felt that the coaching approach focused on success, maximising potential and achieving goals. The process was reported to

encourage the client to move forward, rather than looking back, to develop insight and awareness. Furthermore, the process was seen to be more collaborative than counselling, with coaches contributing more to the conversation with clients, indeed clients are seen as the experts within the relationship (Hart, Blattner & Leipsic, 2001).

The main aim of counselling was identified as helping to heal or repair. The therapeutic interaction worked with feelings and helped clients to process their emotional responses. Conversations in counselling were client led and viewed as a fluid means of helping the client uncover and discover. (Hart, Blattner & Leipsic, 2001). Whilst counselling was seen to focus on relieving distress and healing, counsellors also noted that coaching included aspects of addressing feelings and past experiences to help the client achieve their goals.

One of the main differences identified by counsellors was that, rather than follow a meandering process of self-discovery, within coaching the client identified goals that they wish to achieve at the beginning of the coaching process (Griffiths & Campbell, 2008). Within organisations, coaches also need to be aware of keeping to an agenda, managing time frames and scheduling appointments at times that are convenient to executives (Hart, Blattner & Leipsic, 2001). Interestingly, some counsellors observed that within business men seem to favour terms such as executive coaching, which are seen to represent status, performance enhancement and skills development (Skerten & Chapman, 2006). Counsellors who worked as coaches within organisations shared concerns relating to ethical considerations and managing confidentiality within a tripartite relationship (Hart, Blattner & Leipsic, 2001).

Counsellors identified differences with coaching contracts and counselling contracts. Coaching contracts were seen to be formal, constrained by specific time frames and focused on client expectations, whereas counselling contracts were seen to be more fluid and could be based on verbal agreements (Griffiths & Campbell, 2008). Indeed, contracting was

highlighted by several studies as being important in coaching as a means of clarifying methods of working, and ensuring that coaching accommodated the client's expectations (Jopling, 2007; Griffiths & Campbell, 2008; Maxwell, 2009). However, although many felt that contracting was important, some practitioners suggested that the initial agreement couldn't accommodate the issues that arose in the coaching sessions. Therefore, it was seen as a provisional framework that may be modified. This was felt to be a beneficial arrangement by both the coach and the client (Maxwell, 2009).

Both coaches and counsellors reported helping their clients to uncover issues that may block their progress. Therefore the main difference between approaches may not be the interpersonal qualities that the practitioners use, but on the practitioners' focus, or the attention they pay to issues that the client wishes to explore. Whereas counselling was seen to focus on personal psychological issues that may be unconscious and from the past, if psychological issues arose during coaching sessions, it was suggested that coaches would acknowledge the issues, discuss how the issues impacted on the client's identified goals, then use the information to help the client move past the problem to achieve a positive outcome (Griffiths & Campbell, 2008).

Practitioners discussed a significant difference in the way that coaches and counsellors relate to clients in practice. Counselling conversations are seen to be client led and be focused on uncovering or gaining awareness. Coaching, on the other hand, discussions are described as more goal orientated and focused (Hart, Blattner & Leipsic, 2001; Griffiths & Campbell, 2008). Further, the power dynamics within the relationships are also described as different. In coaching clients normally see their coach as an equal, whereas counselling clients may see the counsellor as an expert (Hart, Blattner & Leipsic, 2001).

Counsellors, who worked as coaches, were aware that counselling clients could become more dependent on the helping relationship than coaching

clients. Therefore counselling practitioners did not develop friendships or self disclose with clients, due to inhibited psychological functioning and vulnerability. As a consequence, personal boundaries were felt to be far more robust and definite (Hart, Blattner & Leipsic, 2001; Skerten & Chapman, 2006). In contrast, coaching practitioners revealed that they were more likely to self disclose with clients, as they felt there were relaxed boundaries and their personal experiences or knowledge could help the client identify their own strategies for change. Due to the positive mental health of coaching clients, practitioners also expressed feeling that they had higher expectations of their clients and did not feel the need to protect them emotionally (Hart, Blattner & Leipsic, 2001). However, some practitioners were concerned that was exercised when divulging personal information. Whilst sharing personal history may demonstrate authenticity and empathy, careful consideration of the benefits to the helping relationship needed to be taken into consideration, as sharing personal details could potentially make the practitioner vulnerable (Skerten & Chapman, 2006).

2.4.2 Managing Boundaries in Practice

Clients identified which helping approach they would like to use based on their self identified needs. Some clients in the study identified that they had chosen to engage with a life coach rather than a counsellor as they did not feel that they needed to be healed, but would rather find a way forward in managing their transient unhappiness or problem. In effect, clients sought life coaching when they felt they were coping but would like to grow, develop and feel better about their life (Griffiths & Campbell, 2008). Coaching also seemed to be a deliberately identified choice within organisations. Coaches with therapeutic backgrounds reported that, within business, the boundary was negotiated with the clients and established differently according to client need and coaches' ability to engage in deeper exploration of personal issues. In some organisations, it appeared that the business was aware that the client or coachee had deeper issues

and was happy to have coaches work with these problems (Maxwell, 2009).

Some coaches have acknowledged uncertainty when asked to define the difference in practice (Jopling, 2007; Maxwell, 2009; Price, 2009). Rather than distinct and rigid, the boundaries were often felt to be blurry and flexible, with some coaches referring to having a gut feeling or intuitively knowing when an issue was something that they shouldn't deal with in coaching (Hart, Blattner & Leipsic, 2001). The boundaries of coaching were also defined by negotiations between coach and clients regarding what would be appropriate to discuss rather than theoretically defined parameters (Maxwell, 2009). Whilst coaches appeared to believe that there is a definite difference between coaching and counselling, they couldn't specifically identify what it was. It was almost as though it was a more superficial form of therapy, but coaches were unable to explicate which particular features of counselling they didn't need in coaching (Price, 2009).

Working at the boundary, participants described four different ways of working depending on their competency and comfort in working with personal material. Some coaches preferred to separate or avoid discussing any personal issues. Others endeavoured to adopt a solution focused rational working style, which removed the emotional context of the issue and focused clients on problem solving techniques. Additionally, practitioners who had more confidence in dealing with psychological or counselling approaches, occasionally briefly dipped into biographical history to inform the present and identify strategies to move forward. Finally, some therapist coaches described working across the boundary and saw that the whole person was in the coaching session. They therefore worked with emotional past issues to help the client move forward (Maxwell, 2009). Working in the fuzzy space, coaches who have counselling or therapeutic training may work with the whole person to help them understand the meaning and purpose in their lives (Jopling, 2007).

Some coaches and counsellors indicated that they worked with both coaching and counselling approaches. Some practitioners choose to work in an integrated way with coaching clients, yet maintain a purely therapeutic approach when counselling (Jinks, 2010).

Coaches in the study had an overriding belief that the clients that approach them for coaching were robust and had positive well-being. They expected their clients to engage with the process, identify positive goals and held their clients accountable for their achievements (Griffiths & Campbell, 2008; Maxwell, 2009). However, Campbell and Griffiths (2008) highlight that mental health is situated on a continuum and results from their study indicate that clients were not situated in either coaching or counselling, but fluctuated on the continuum between the two approaches. Indeed, some therapist coaches believed that coaching clients could be as emotionally vulnerable as therapy clients but concealed it (Maxwell, 2009). Coaches additionally discussed how working in an organisational environment the whole person is present in the coaching sessions. Therefore they do not solely focus on work-related issues as some of the reasons for seeking training may lie in personal problems outside of the work context. As a consequence, the issue that the coach was contracted to address was often an effect of an underlying personal issue (Maxwell, 2009).

It was noted that, whereas there may be a stigma attached to counselling, clients tend to see a programme of coaching as a positive. They may share that they are in coaching with colleagues and friends (Hart, Blattner & Leipsic, 2001). However, counsellors expressed concerns about meeting the best interests of coaching clients who may not find counselling acceptable due to negative perceptions of the therapeutic approach. It was felt that having established a good relationship it was a disservice or unethical to refer the client to an additional professional. The practitioner felt that the client may feel rejected (Jinks, 2010).

2.4.3 Knowledge and Training

Coaches and counsellors stated that they were concerned about the current standards of training within coaching (Hart, Blattner & Leipsic, 2001). They were dismissive of the brief training that is currently available, believing that it was insufficient to provide the knowledge and skills required (Jinks, 2010). Participants discussed duty of care and the potential to do harm with unskilled interventions if coaching practitioners do not have therapeutic training and seek to explore deeper feelings. It was believed that a lack of understanding could lead to a client experiencing an emotionally distressed state, which they were unprepared to manage. Consequently, there may be a breakdown of trust and a breach in the helping relationship (Jopling, 2007).

Jopling (2007) suggests that a good understanding of psychology and counselling theory is needed to be able to identify blocks which may impede development. Practitioners believed that coaches needed to be aware of working in the client's best interest and working within their competences to maintain professionalism. Some felt that regulation was needed to instil confidence in clients and provide clarity of the services offered. In particular, counsellors were concerned about coaches' abilities to recognise mental health problems and manage them effectively (Hart, Blattner & Leipsic, 2001; Maxwell, 2009; Price, 2009; Jinks, 2010).

Practitioners also expressed concerns about coaches' self-awareness and whether they may unconsciously introduce their own personal problems, biases, attitudes and assumptions into the coaching context (Hart, Blattner & Leipsic, 2001). Further, Maxwell (2009) suggested that it would be beneficial for coaches to have rigorous regulated training and continuous supervision to enhance professional and personal development. In addition, peer support may enable coaches to discuss theories and ways of working in different environments (Hart, Blattner & Leipsic, 2001).

2.5 Conclusion

Historical context can often help put cultural beliefs in perspective and provide a deeper understanding of current practice. The past hundred years have seen a period of significant social change, which has had a profound impact on the way people interact and experience challenges in their everyday lives. Counselling and coaching have evolved over the last century to provide support and assistance previously offered by communities and families. The development of the 'helping through talking approaches' has often appeared simultaneous, each addressing a need in society for a relationship that gives assistance in overcoming problems and enhancing personal development. Due to the stigma associated with poor mental health, coaching has sought to distance itself from counselling by suggesting hypothetical boundaries between the two approaches. Whilst these boundaries may theoretically serve to demarcate the disciplines, in practice the approaches appear to be more similar than different.

Whilst counsellors undergo extensive training to be able to manage challenges and facilitate growth, this may present fundamental problems for newly trained coaches. As coach education is inconsistent, many coaches may struggle to identify the boundaries in practice or have a limited understanding of how to manage the complexities of mental health and problems with living. Studies of counsellors' opinions and coaches' experiences have shown that practitioners believe psychological knowledge would be helpful for coaches to help them acknowledge and manage issues that may block progress in practice. Further, practitioners reported that the boundary between coaching and counselling was often negotiated with clients and felt to be blurry or flexible. Coaches additionally expressed concerns regarding the standards of coach training and the need for practitioners to work within their capabilities.

The conclusion drawn from the historical context and the practitioner studies is that clients may seek to conceal psychological difficulties due to

negative perceptions of mental health in society. As a consequence, clients may choose to engage in coaching to receive positive support. As coach training is inconsistent and may not include psychological knowledge, newly trained coaches may find it difficult to identify boundaries between coaching and counselling approach in practice. As a result, the newly trained coach needs to be aware of working within their competency. The experiences of newly trained coaches would appear to be an under researched area. To address these concerns, four research questions were developed that reflected these issues.

- How do novice and newly trained coaches perceive the similarities and differences between coaching and counselling?
- How do novice and newly trained coaches identify and manage the boundaries between coaching and counselling in practice?

Novices and newly trained coaches acquire their knowledge and skills from teaching, role plays and monitored practice. Following consistent practice over a period of time, individuals increase their experience in the field. Gaining experience is achieved by applying knowledge in contextual situations (Jarvis, 2006). The process may take effort and include learning from trial and error, and failing to help the individual develop effective problem solving strategies (Nyiri, 1988). As experience and knowledge are internalised and skills are mastered, the person acquires expertise and may use intuition to their practice decisions (Jarvis, 2006; Myers, 2002; Kahneman, 2011).

In order to investigate whether perceptions may be transformed by experience, the research incorporated questions to investigate experienced practitioners' views and opinions:

- How do experienced coaches and counsellors perceive the similarities and differences between coaching and counselling, identify and manage boundaries, and use their skills and knowledge in practice?

- How do proficient coaches and counsellors experience the boundaries between coaching and counselling?

The next chapter will address the first two research questions and report the findings from the first mixed methods study in this programme of research.

Chapter 3 Novice and Newly Trained Coaches Study

3.1 Introduction

The preceding two chapters discussed similarities and differences between the helping approaches, presented the aims of the research and highlighted concerns regarding consistent standards of training and the abilities of coaches to identify and manage boundaries in practice. This chapter moves away from a contextual understanding of working with boundaries in practice and reports the findings from the first study in the programme of research. A theoretical understanding of the way that novice and newly trained coaches construct and implement information will be discussed and a framework, which aligns concepts of novice and newly trained coaches with developmental frameworks from coaching and mentoring, will be presented. Ethical considerations of working with clients on the boundary will be considered. The mixed method investigation will incorporate a quantitative survey design and qualitative interviews. Outcomes from the survey will be reported and themes that emerge from the interpretive phenomenological analysis (IPA) of interview transcripts will be presented. The integrated findings from the survey and themes from the interviews will be discussed, as well as concerns relating to competence and confusion.

3.2 The Challenges of Novice and Newly Trained Coaches

In stage models of professional development the terms 'novice' and 'advanced beginner' refer to the level of skills and knowledge individuals employ in practice (Benner, 1984; Dreyfus & Dreyfus, 1985). Novices are beginners, who have rudimentary training but very little practice experience. Novices follow explicit rules and process frameworks, focusing on objective aspects specific to their professional domain (Dall'Alba & Sandberg, 2006). Without experience of practice, novices are not able to use context to temper judgements. As a consequence, rules and theories are followed rigidly, irrespective of the single case context (Benner, 1984; Dreyfus & Dreyfus, 1985).

Unlike experts, who draw on experiences and contextual knowledge, novices are frequently drawn to theoretical rules learnt in training or education to inform their practice (Dreyfus and Dreyfus, 1985; Daley, 1999). Rather than consider wider principles in context, novices may tend to focus on particular facts or techniques related to their coach training (Bransford, Brown & Cocking, 2000). Depending on the training received, some novices may learn how, but may not understand or be introduced to the theory that informs the practice (Dracup & Bryan-Brown, 2004).

Novices appear to learn by forming concepts from the information they're presented with and continue to use their perceptions to make sense of real life situations when their training is complete (Daley, 1999). Studies have shown that novices may lack confidence in applying recently learnt knowledge in autonomous practice and they often seek reassurance or confirmation that action taken is appropriate in context (Daley, 1999). Additionally, they may struggle with perceived expectations from clients and therefore rush to provide a solution based on a learnt framework or technique. Experts, on the other hand, tend to take longer to evaluate the situation so that they can fully appreciate the problem before they act (Bransford, Brown & Cocking, 2000).

Advanced beginners (Benner, 1984; Dreyfus & Dreyfus, 1986; Dall'Alba & Sandberg, 2006) differ from novices in that they have accumulated experience and knowledge base. In addition to explicit rules, advanced beginners combine implicit context dependent rules from previous experience with guidelines to inform practice (Dall'Alba & Sandberg, 2006). In this study, the term 'newly trained' was used instead of advanced beginner in order to depict coaches who have used coaching techniques as part of their professional role for some time and, consequently, may not consider themselves to be beginners. The term 'newly trained', therefore, refers to people who had recently completed a qualification in coaching to develop their professional skills.

An important quality for novice and newly trained coaches is metacognition and being aware of the limits of their knowledge and competence. Being able to see and recognise problems in a wider context may be fundamental to developing novice and newly trained coaches' confidence and competence. Therefore, it could be argued that acquiring competence within the field entails gaining the ability to perceive the patterns of behaviour or information that the client presents (Bransford, Brown & Cocking, 2000). In contrast to novices and newly trained coaches, experts adopt a constructivist approach to learning (Daley, 1999). They organise their knowledge into schemas to accommodate familiar problem types or meaningful patterns of behaviour. Experts may, therefore, unconsciously categorise information into 'chunks' that they have identified as relating to a certain domain or problem (Bransford, Brown & Cocking, 2000). As a result, experts develop knowledge that can be recalled in relation to a particular subject or context. In this way, an expert's knowledge is 'conditionalised' (Simon, 1986). As a consequence, experts may identify patterns or characteristics in behaviour that the novice may not be aware of (Bransford, Brown & Cocking, 2000). It could be said that the progression to expert is gradual and developed as skills are implemented and refined. These skills are then assimilated with contextual experience and knowledge.

3.3 Ethics and Duty of care

Identifying discrete areas of practice in a multi-faceted industry has significant implications for novice and newly trained coaches with limited practical experience. Without the advantage of professional skills or contextual knowledge, it is important that novice and newly trained coaches are aware of working within their competencies and the potential to cause harm to vulnerable clients.

For instance, in recent studies, Maxwell (2009) found that the supposition that coaching only addresses professional issues is unsubstantiated. In particular, if coaching is required to address developmental issues, the

distinction between coaching and counselling becomes increasingly hard to define (Bachkirova, 2007). Coaches report that, far from being clearly separated, professional and personal matters are tightly interwoven. Coaches need to be equipped to work with the 'whole messy human' which includes the client's emotions and past, as well as their performance targets. For novice coaches and those without a psychological background, it is important to know themselves and understand their capabilities. In effect, those with less experience or knowledge need to be aware of working within their competencies. As a consequence, Berglas (2000) suggests that coaches should undergo some form of psychological training. However, within the coaching industry, training can be inconsistent and lack rigour.

Although studies have investigated experienced internal coaches' experiences of working with the boundary in practice (Maxwell, 2009; Price, 2009), there would appear to be an absence of research that reflects the dilemmas of newly trained coaches when trying to identify boundaries between coaching and counselling. The purpose of this study was to utilise a mixed methodology to investigate novice coaches' beliefs about the similarities and differences between coaching and counselling and to determine whether a common consensus of boundaries between the two approaches could be distinguished. In addition, the research investigated how confident novice coaches felt about identifying boundaries and working within their competencies, as these issues may have ramifications on client confidence, working ethically and duty of care.

3.4 Methodology

Epistemological stances focus on knowing and knowledge (Morgan, 2007). Natural sciences mainly take a positivistic stance in investigating the known world. If research is only based on measureable known factors, which excludes all extraneous variables, it would seem appropriate to adopt an objective empirical approach. However, when investigating subjective experience, which incorporates a person's perception of

contexts and different emotions, it is questionable whether a positivistic paradigm is appropriate. Each individual will perceive the world in a different way and derive different meanings from events and experiences. As a consequence, it could be argued that there is not a definite measurable knowledge (Langdridge, 2007).

The positivistic quantitative approach reduces psychological phenomena to variables that can be measured or scored. Questionnaires can be used to generate data about people's attitudes, behaviour and beliefs. However, surveys or questionnaires rarely capture the whole phenomena. There may be other factors that affect a person's perception of a situation or influences meaning, based on personal history, context or mood. Further, people may perceive the same situation in different ways, depending on the circumstances at the time (Langdridge, 2007).

3.4.1 Epistemology

To accurately capture and explain the subjective experiences of the participants who took part in this research, the studies in this thesis adopted a 'pragmatic constructivist' epistemology. The pragmatic approach is based on the assumption that knowledge arises from actions and what works in a given situation and emphasises the 'what' and 'how' aspects of investigating the research problem. Therefore, rather than focusing on a theoretical foundation or specific method, the pragmatic approach gives primary importance to the research question (Tashakkori & Teddlie, 2003; Johnson & Onwuegbuzie, 2004).

The constructivist perspective is based on an underlying assumption that people construct meaning according to social processes and the context in which they live (Creswell, 2003). This body of work incorporates both quantitative surveys and reflexive qualitative studies. The surveys provide statistical reports of practitioners' views and beliefs, to raise awareness of the incidence of prevalent opinions on working with boundaries in practice. The statistical data provides context against which the qualitative interviews explore individuals' experiences and perceptions of working

with the boundaries between coaching and counselling in depth (Etherington, 2004).

The goal of research, then, is to rely as much as possible on the participants' stance or belief about the situation being studied.

Constructivist research develops subjective meanings of individuals' experiences. The generation of meaning is seen to be social, arising in and out of interaction with a human community (Cresswell, 2003). The constructivist model endeavours to value all perspectives and develop an understanding of shared meanings between practitioners. Each participant may bring different perceptions which would be influenced by their knowledge, experience, relationships and context. The meanings of the autobiographical accounts are negotiated in context. The researcher plays an active role, selecting and interpreting data from qualitative interviews. The aspects from the participants' stories that have been extracted and examined may not have been the parts that they had been consciously trying to emphasise or share (Etherington, 2004). As a result, a different researcher may choose to tell a different story.

The process of constructivist research is largely inductive, with the inquirer generating meaning from the data collected in the field. The meanings are negotiated and shared in the interaction between the researcher and participant (Rodwell, 1998). As a result, the researcher openly acknowledges their participation in the research process and reflects on their emotions, thoughts, and experiences to demonstrate authenticity and transparency (Lincoln & Guba, 2000). The researcher's intent, then, is to make sense of (or interpret) the meanings others have about the world.

As incorporating subjective experience could lead to outcomes that may not be generalised, positivistic approaches often question the reliability and validity of qualitative research (Guba & Lincoln, 1989; Finlay, 2004). Whilst findings may not be representative of the wider population, the research provides a holistic vista on co-constructed meanings and depth of understanding that is unlikely to be obtained by positivistic analysis.

Therefore, rather than assume positivistic criteria for reliability and validity, the constructivist paradigm adopts an approach focused on trustworthiness and authenticity. Rodwell (1998) suggests four key criteria need to be satisfied to demonstrate trust in the data:

Credibility	To show a depth of understanding in the issues and meanings presented
Dependability	To demonstrate the suitability of the methodological approach
Confirmability	To show the link between the data and reported findings
Transferability	Based on the interpretation of the reader as to whether the created meanings and interpretations are applicable to other practitioners or contexts

In addition, to demonstrate authenticity, it has been suggested that the researcher needs to demonstrate fairness in the representation of different perspectives. According to Rodwell (1998), the research should also demonstrate:

- **Ontological authenticity**
Ontological authenticity reflects whether participants have gained greater self awareness and understanding by taking part in the research.
- **Educated authenticity**
Educated authenticity is demonstrated by generating a deeper understanding of the meanings constructed by practitioners and why different perceptions may exist.
- **Catalytic authenticity**
Catalytic authenticity refers to identifying co-constructed thoughts or actions that may initiate change.

- **Tactical authenticity**

Tactical authenticity considers whether participants in the research feel that they have been empowered (or diminished) by their contribution to the study.

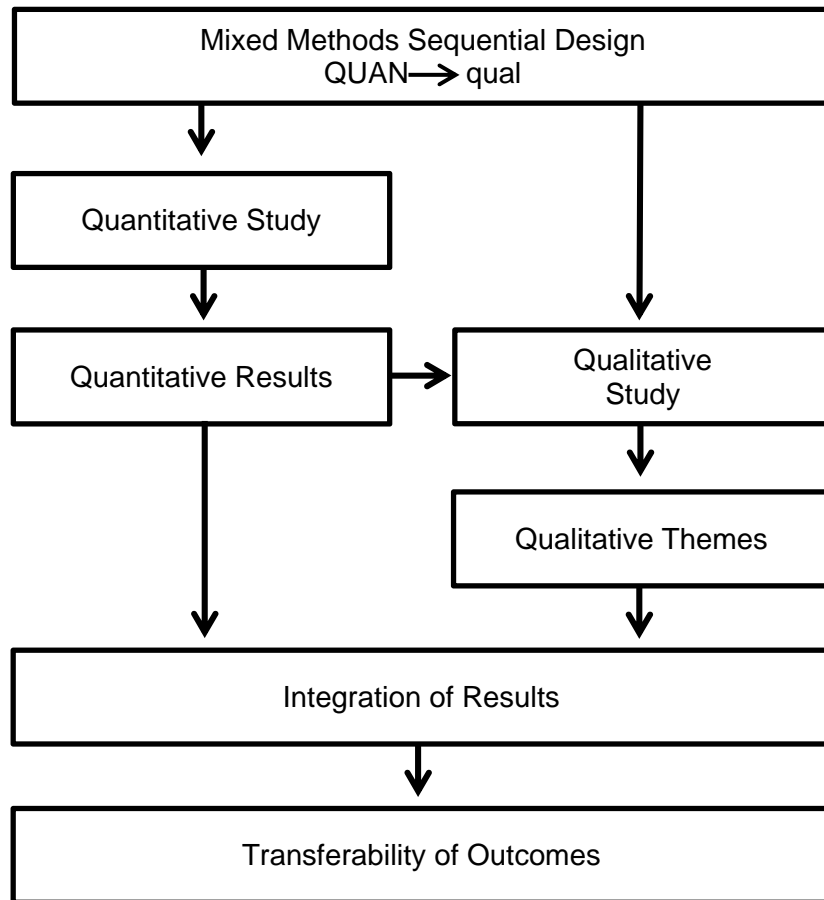
An evaluation of how well this programme of research met the criteria for authenticity and trust can be found in the summary in Chapter 6.

3.4.2 Design

To gain a comprehensive understanding of novice coaches' perception of the similarities and differences of coaching and counselling, and awareness of working with boundary issues, a mixed methods design was used. The mixed methods approach is a pluralistic paradigm that bases knowledge claims on pragmatic grounds. Within this study, mixing methodologies refers to synonymously combining a numerical quantitative survey with narrative qualitative semi-structured interviews. A mixed method design facilitates the exploration of different opinions and knowledge to gain a deeper understanding of novice and newly trained coaches' experience. For instance, analysis of the semi-structured interviews may identify further concepts that illustrate important aspects the participants experience and enhance understanding of the responses in the quantitative survey (Bazely, 2004).

The mixed method approach incorporated a quantitative study and qualitative study to create one overall research study (Johnson & Onwuegbuzie, 2004). The design adopted a sequential approach (see Figure 1). The quantitative survey data was collected initially and represented the major component in the study. The qualitative interview data (Hanson et al., 2005) was gathered subsequently to elaborate and expand on knowledge gained from the dominant source (Hanson, Cresswell, Plano-Clark, Petska & Cresswell, 2005).

Figure 1 Sequential Mixed Methods Design for Novice Study



3.5 Quantitative study

To identify the factors that novice coaches perceive to be similar and different in coaching and counselling, a quantitative cross-sectional survey was used.

3.5.1.1 *Participants*

A competence framework was developed to identify the skill level of the participants in the study (see Table 1). The framework applied similar principles to the model developed by Dreyfus and Dreyfus (1985), but included skills and knowledge specific to the coaching domain. As shown in Table 2, the skills identified could be mapped onto developmental frameworks for coaching (EMCC, 2009; ICF, 2006) and mentoring (Merrick & Stokes, 2011).

Table 2 Comparison of Coach Competence Frameworks

Coach Competence Framework	Stage 1	Stage 2
First study	Novice coaches -Limited experience -Personal development -Integral to current training -Practice with peers -10 documented hours of practice	Newly trained coaches -Prior experience in related roles (e.g. facilitation, training, HR, management) -Career development -Accredited qualification -Practice with client base
Merrick & Stokes (2011)	Novices -Needs to know rules -Require scheme knowledge and context knowledge of process	Developing -Process knowledge -Awareness of boundaries -Awareness of skills required
EMCC (2009)	Foundation -Understand the practice of coaching -Core coaching skills -Work with others to support and encourage development -Use coaching approach within their own role -Understand how coaching integrates with vocational roles	Practitioner -Use coaching as part of main job or starting as external coach -Work with a small range of clients -Help clients improve performance, stretch capability and build confidence -Apply a limited range of models, tools and processes
ICF (2006)		The Practiced Coach -Completion of accredited certification -60 documented hours of practice -10 hours of supervision -Certified portfolio

The purposive sample consisted of undergraduate students from the University of Bedfordshire and coaches who had recently completed coach training in the UK. Social work students who had recently completed brief peer coaching training and psychology students who had completed the coaching psychology unit at the University of Bedfordshire

were invited to take part in the research following completion of their courses.

However, despite concerted efforts to recruit students for the study, the numbers of participants proved to be disappointingly low. To attract more participants to the study, the criteria were expanded to include newly qualified coaches. Forty-four coaching schools (see Appendix B) were approached directly by email. The email asked training providers for assistance in forwarding details of the study to students who had recently completed coaching courses. The request gave details of the study and a link to the online survey. A request for participants to take part in the online survey was also placed in two journals: *The Coaching Psychologist* and *Coaching Psychology International*. In addition, a request for participants was posted on the 'Coaching at Work' and British Association for Counselling and Psychotherapy (BACP) coaching division message boards on the LinkedIn website.

3.5.1.2 Measures

The questionnaire included demographic items relating to previous experience of coaching and counselling, related professional background, gender and age.

To explore which factors were predominantly associated with coaching and counselling, the questionnaire included terms derived from literature which discussed the boundaries between the two approaches (Zeus & Skiffington, 2000; Grant, 2003; Bluckert, 2005; Bachkirova, 2007). The terms were grouped into categories and related to questions such as:

Which issues can be addressed by coaching and/or counselling?

Self limiting beliefs	Coaching	<input type="radio"/>	Counselling	<input type="radio"/>
Confidence	Coaching	<input type="radio"/>	Counselling	<input type="radio"/>
Self esteem	Coaching	<input type="radio"/>	Counselling	<input type="radio"/>

Which of the following aspects apply to coaching and/or counselling?

Adult to adult relationship	Coaching	<input type="radio"/>	Counselling	<input type="radio"/>
Goal focused	Coaching	<input type="radio"/>	Counselling	<input type="radio"/>
Alleviating distress	Coaching	<input type="radio"/>	Counselling	<input type="radio"/>

Which practitioners demonstrate the following qualities and skills?

Respect for client's beliefs and values	Coach	<input type="radio"/>	Counsellor	<input type="radio"/>
Commitment to 'helping' relationship	Coach	<input type="radio"/>	Counsellor	<input type="radio"/>
Empathy	Coach	<input type="radio"/>	Counsellor	<input type="radio"/>

Which outcomes are expected in coaching and/or counselling?

The achieving potential	Coaching	<input type="radio"/>	Counselling	<input type="radio"/>
Decision making	Coaching	<input type="radio"/>	Counselling	<input type="radio"/>
Reduced distress	Coaching	<input type="radio"/>	Counselling	<input type="radio"/>

Psychological theories are used to help clients in both coaching and counselling. Are the methods used similar or different?

Cognitive Behavioural approach (If different, in what way?)	Similar	<input type="radio"/>	Different	<input type="radio"/>
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In order to allow comparison of data, permission was given to include two multiple choice questions from the boundary questionnaire developed by Price (2009) (see Appendix A). The questions asked participants to indicate when they would not start coaching and when they would end coaching (e.g. "The client needed more psychological support than I was able to provide"). These questions were rated on a 3-point scale, with responses 'Very well', 'Possibly' or 'Not at all'.

How well would the following describe the reasons for you deciding not to start peer coaching?

	Very well	Possibly	Not at all
The client seemed uncommitted to change	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The client appeared to have mental health issues	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

How well would the following possibilities describe the reasons you would finish coaching or refer your client?

	Very well	Possibly	Not at all
The work became past, rather than future-orientated	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The client appeared to have mental health problems	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

The complete questionnaire was comprised of 10 research questions.

3.5.1.3 Procedure

Upon completion of their coaching courses, a printed questionnaire was given to social work students and coaching psychology students who had indicated that they wished to take part in the study.

A short information sheet, which included a consent statement, was attached to the front of the questionnaire. The participants signed the consent form to indicate their willingness to take part in the study. The questionnaire took 10-15 minutes to complete.

In addition, newly trained coaches received details of the research by email from training schools and third party contacts. The email contained information about the study and an embedded link to the survey. Data were collected online using www.surveymonkey.com as the survey platform. Newly trained coaches were asked to click on the link if they wished to take part in the study. The front page of the online survey informed the participants that the survey would take 10-15 to complete.

3.6 Quantitative Survey Results

A total of 99 novice coaches completed the questionnaire. The sample was comprised of 90 (94.7%) females and 5 (5.3%) males. Five respondents did not specify their gender. Respondents reported a broad age range with 23 (23.7%) aged 18-24, 26 (26.8%) aged 25-34, 24 (24.7%) aged 35-44, 19 (19.6%) aged 45-54 and 5 (5.2%) aged 55+.

To gain an understanding of the knowledge and prior experience that novice coaches can draw on to inform their perceptions of approaches to

helping, respondents were asked whether they had previous experience of coaching and counselling. Novice coaches revealed that 44.8% had experience of being a coach and 37.8% had experience of being a coaching client. Further, many participants (50.5%) stated that they had received counselling, with 22.9% reporting experience of counselling practice (see Table 3).

Table 3 Novice and Newly Trained Coaches' Experience of Coaching and Counselling

Experience of Coaching		Experience of Counselling	
As a coach	44.8%	As a counsellor	50.5%
As a client	37.8%	As a client	22.9%

As coaching is widely acknowledged as a cross-disciplinary practice (Grant, 2003; Grant & Zackon, 2004), respondents were asked to indicate their professional backgrounds. This experience included business (12.9%), education (19.4%), human resources (6.5%), coaching (14%), psychology (24.7%), psychotherapy (3.2%), counselling (11.8%) and nursing (1.1%). However, as the study was initially focused on the opinions of social work students who had recently been introduced to peer coaching, the majority (52.7%) reported a background in social work.

3.6.1 Helping people

Novice coaches indicated that coaching was most suitable for 'normal' (93.9%) and high functioning populations (86.6%), whereas counselling would be most suited to helping dysfunctional individuals (93.8%) (see Table 4). However, many respondents also stated that counselling was fitting for normal (45.9%) and high functioning individuals (43.3%). More surprisingly, a third of novice coaches (33.3%) also felt that coaching was appropriate for individuals with mental ill-health.

Table 4 Novice coaches' perceptions of suitable approaches to help client populations

	Coaching	Counselling
High functioning individuals	86.6%	43.3%
'Normal' mental health	93.9%	45.9%
Dysfunctional individual	33.3%	93.8%

3.6.2 Issues Addressed by Coaches and Counsellors

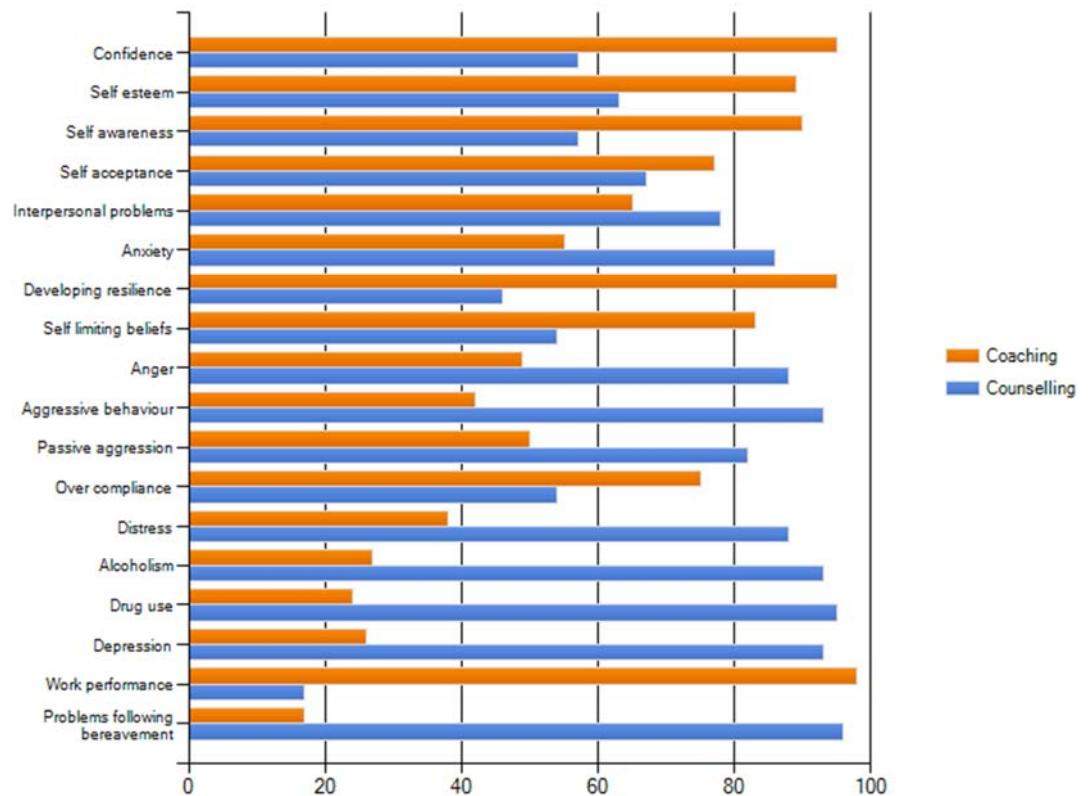
When considering which issues would be addressed by coaches and counsellors, the majority of respondents reported that coaching would be best suited to helping individuals with improving work performance (99%) and personal growth factors of increasing confidence (96%), self awareness (91.8%), self limiting beliefs (83.8%) and self-esteem (83.4%) (see Figure 2). Further, whilst many participants reported that counselling would help people to develop resilience (46.9%), the majority (96.8%) indicated that coaching would be a more suitable approach.

Adopting a counselling approach to helping people with distress and emotional issues was strongly supported by many participants; more specifically, distress (90.7%), anxiety (87.8%), depression (96.7%), anger (89.8%), aggressive behaviour (93.9%), passive aggression (84.5%). Further, problems associated with substance abuse such as alcoholism (93.9%) and drug use (96.9%) were also strongly associated with counselling. Problems with bereavement were predominantly reported to be most suited to counselling (98.6%), with only 17.3% respondents indicating that this was an issue that could be addressed in coaching.

Novice and newly trained coaches reported that counselling (78.8%) and coaching (65.7%) would assist with interpersonal problems. Both coaching (78.6%) and counselling (68.4%) were seen as appropriate to develop self acceptance. In addition, whilst the majority reported that coaching would

be suitable to address over compliance (77.3%), over half also indicated this would be an issue that could be connected with counselling (55.7%).

Figure 2 Which Issues can be addressed by coaching and/or counselling?



3.6.3 Aspects Associated with Coaching and Counselling

Respondents principally associated coaching with action orientated aspects such as being goal focused (99%), present and future focused (96.9%), proactive (91.8%), dynamic (84.7%), feedback (91.8%), flexibility (93.9%) and quick results (95.8%). On the other hand, in-depth analysis of issues (93.9%) and exploration of client's past history (96.9%) were predominantly related to counselling.

In addition, 'exploration of client's feelings was strongly associated with counselling (88.8%); however, 57.1% of respondents also indicated that this applied to coaching. Further, whilst 'understanding of how thoughts and emotions influence behaviour' was strongly associated with

counselling (90.7%), many felt that this was also addressed by coaching (55.7%).

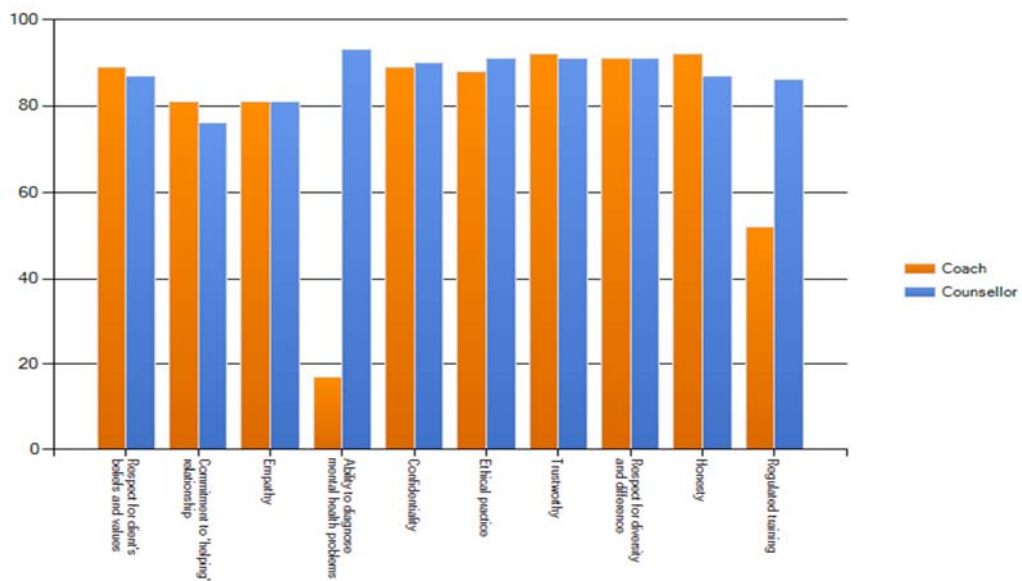
Although the majority (88.8%) indicated that exploration of the client's feelings was an aspect of counselling, over half (57.1%) stated this also featured in coaching. Surprisingly, 'Improve functioning' was reported by 92.9% of respondents as an aspect primarily achieved through coaching, with only 54.1% indicating this was attended to in counselling. Overlap of opinion was also reported for alleviating distress, with 85.6% of participants indicating that counselling predominantly focuses on addressing the issue. However, many respondents (41.2%) also indicated that alleviating distress applied to coaching.

Respondents indicated that a non directive approach was applicable to both counselling (66%) and coaching (57.4%). Similarly, clients' ability to process personal matters in a rational way was reported to be strongly associated with both coaching (72.4%) and counselling (60.2%).

3.6.4 Practitioners' Qualities and Skills

Counsellors and coaches were perceived to demonstrate very similar abilities (see Figure 3). Participants reported perceiving coaching and counselling practitioners equally for empathy (82.7%) and respect for diversity and difference (92.9%). Counsellors were widely reported to have the ability to diagnose mental health issues (97.9%), whereas few (17.9%) indicated that coaches would have the skills to do so. Counsellors undergo rigorous and regulated training to develop the knowledge necessary to support individuals with psychological problems. This was reflected in the majority of participants' responses (89.6%). However, over half (54.2%) of novice coaches erroneously indicated that coaching also incorporates regulated training.

Figure 3 Which practitioners demonstrate the following qualities and skills?



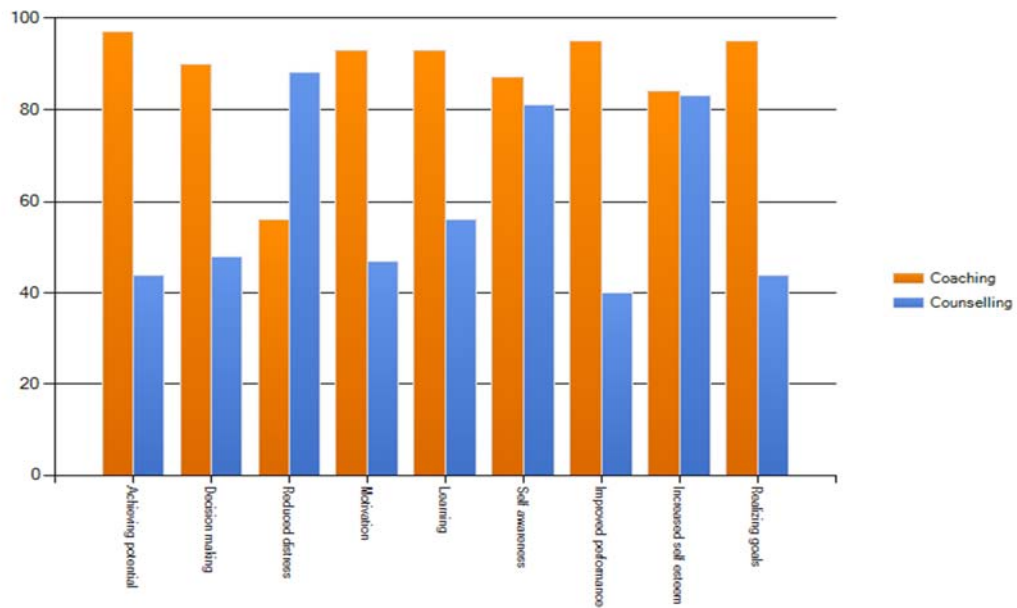
3.6.5 Outcomes Expected in Coaching and Counselling

Coaching was identified as the principal means of achieving many of the outcomes identified in the survey (see Figure 4). These included achieving potential (99%), decision making (91.8%), improved performance (96.9%), realising goals (97.9%), motivation (94.9%) and learning (95.9%). Novice coaches also reported that increasing self awareness was an expected outcome for both coaching (88.8%) and counselling (82.7%) approaches. Likewise, increasing self esteem was also seen as a goal of both coaching (85.7%) and counselling (84.7%) (see Figure 4). Reducing distress (90.7%) was the most prevalent outcome identified for counselling. However, the majority of novice coaches (57.7%) also indicated that reducing distress was an expected outcome for coaching.

3.6.6 Psychological Models Applied in Practice

As coaching incorporates psychological models from counselling practice, respondents were asked whether core theories were utilised in a similar or different way in coaching. The majority of novice students reported that both cognitive behavioural (82.3%) and person centred (89.2%) theories were implemented in similar ways.

Figure 4 Which outcomes are expected in coaching and/or counselling?

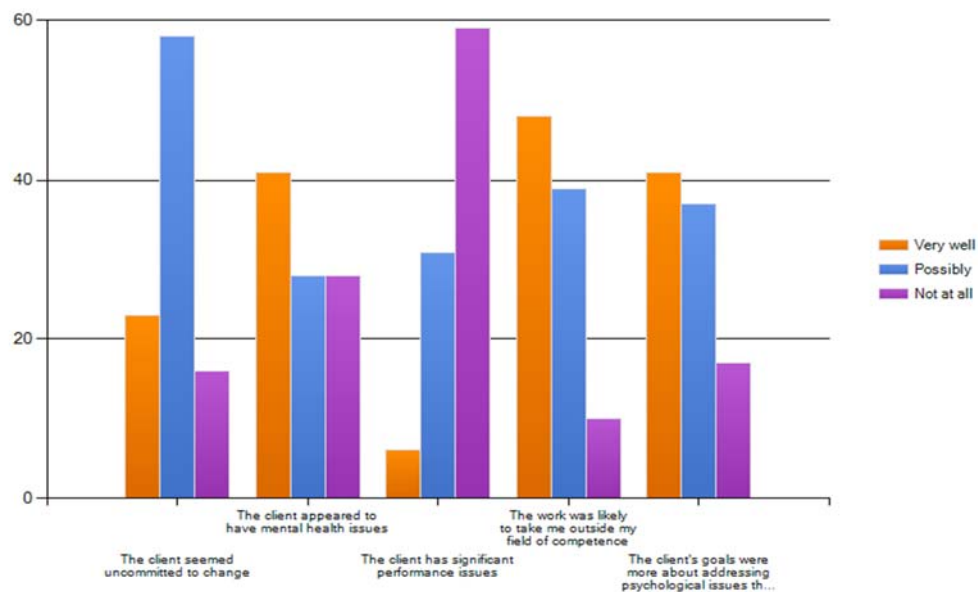


3.6.7 Reasons for Not Starting Coaching

Novice coaches' inexperience and lack of confidence in abilities was reflected in the majority (59.8%), reporting that they possibly would not start coaching if the client was uncommitted to change (see Figure 5). Whilst many (42.3%) stated that they would not commence coaching with clients who appeared to have mental health problems, a significant number (28.9%) of participants indicated that this would not prevent them from commencing coaching. A further 28.9% of respondents also reported that they would consider starting coaching. This indicates that a large proportion (57.8%) of novice coaches would consider coaching a client with apparent mental health problems.

The majority (61.5%) did not perceive 'significant performance issues' as an obstacle to coaching. This would support the premise that coaching is often focused on improving work performance. However, the inexperience of novice coaches was evident in the 32.8% who expressed reservations. The majority of novice coaches (49.5%) indicated awareness of working within their competencies. However, many (40.2%) reported considering the possibility of working beyond their field of competence.

Figure 5 How well would the following describe the reasons for you not to start coaching?



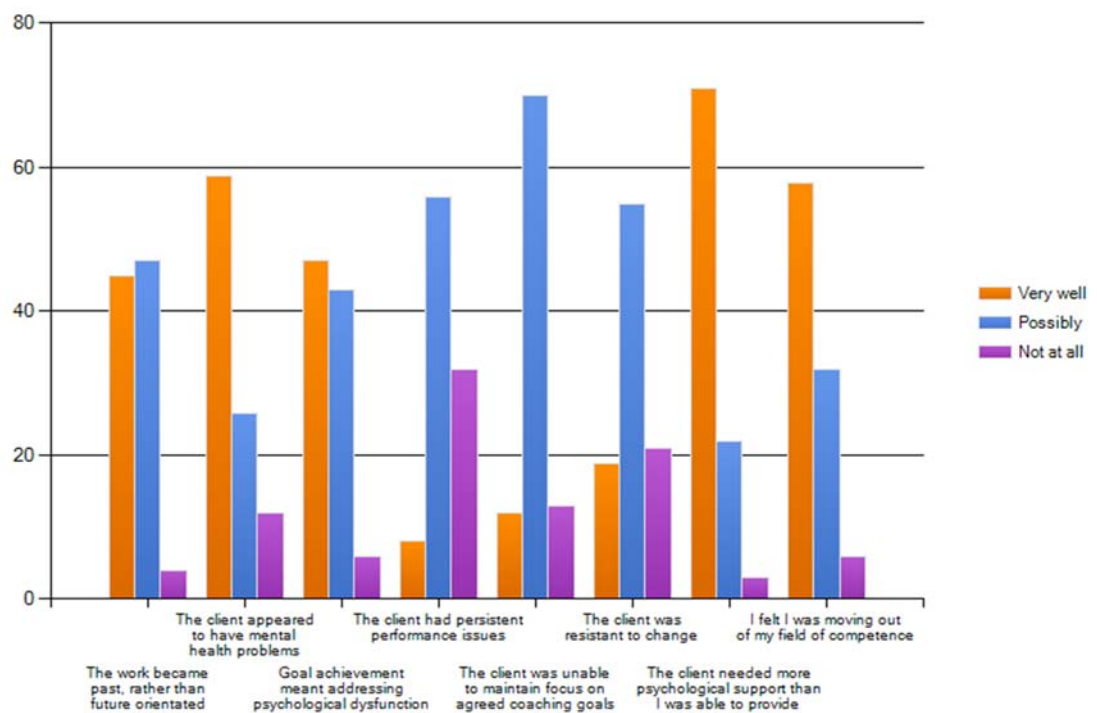
Many newly trained coaches (43.2%) reported that they would not start coaching if clients appeared to be focused more on addressing psychological issues rather than improving performance or well-being. However, 38.9% of respondents reported that they would possibly start coaching clients whose goals were more about addressing psychological issues.

3.6.8 Reasons to Finish Coaching or Refer Clients

The majority of novice coaches indicated that they would finish coaching or refer clients who exhibited mental health problems (60.8%), needed more psychological help than they were able to provide (74%), or exceeded their field of competence (60.4%) (see Figure 6). Further, many reported feeling unsure about how to proceed with clients who had persistent performance issues (58.3%), were unable to maintain a focus on goals (73.7%), and were resistant to change (57.9%). Novice coaches also reported that they would finish coaching or refer clients who became intransigently past, rather than future, focused (46.7%), with many (49%) stating that this may be a possible reason to terminate coaching. In

addition, participants indicated that they would terminate (49%) or consider ending coaching (44.8%) when goal achievement was dependent on addressing psychological dysfunction.

Figure 6 How well would the following possibilities describe the reasons you would finish coaching or refer your client?



3.7 Qualitative Study

In addition to the quantitative survey, qualitative semi-structured interviews were utilised to explore the novice coaches' phenomenological 'lived experience' of working with theoretical boundaries in practice.

3.7.1.1 *Participants*

The participants in the qualitative study comprised three third year students, who had recently completed a unit in coaching psychology at the University of Bedfordshire, and three newly trained coaches, who had recently completed training on University accredited coach training courses whilst working in the private sector. This was a self-selected sample. The student participants volunteered to take part in the study

following a request during a tutorial at the University of Bedfordshire. The newly trained coaches responded to a snowball sampling request. All participants were female.

3.7.1.2 Procedure

Hefferon and Gil-Rodriguez (2011) suggest that interview schedules should be short and ask broad, open questions to encourage participants to expand their parameters. The semi-structure interview schedule for this study was comprised of eight open questions to gain rich data for interpretative phenomenological analysis (IPA). The questions included descriptive, narrative, comparative and evaluative elements to encourage open discussion (e.g. How would you describe the differences between coaching and counselling? How confident would you feel in recognising the boundaries between coaching and counselling?). The interviews were recorded on a digital recorder. The audio recordings were subsequently transcribed for analysis. As the chosen method of analysis investigated subjective accounts of phenomenological aspects of a person's life, it is suggested that each participant is given a pseudonym to humanise the context of their experience (Smith, Flowers & Larkin, 2009). Therefore, each participant was assigned an anonymous alias.

3.7.1.3 Novice Coaches

The interviews with novice students from the University of Bedfordshire took place in a private room on the Luton campus. Before starting the interview, participants were asked to read an information sheet (see Appendix C) about the purpose of the study. The information sheet also assured participants that participation was voluntary, anonymous and all material shared would remain confidential. In addition, participants were informed that the interviews would be recorded and transcribed following the interview and all data would be stored securely. The participants were then asked to sign a consent form (see Appendix D) indicating that they had read the information and were willing to take part in the study. After

the interview, students were thanked for their participation and invited to contact the interviewer if they had any further questions or concerns.

3.7.1.4 *Newly Qualified Coaches*

The interviews with the newly qualified coaches took place using Skype video calls. Prior to the call, the interviewer sent each participant an information sheet which stated the aim of the study, rights to anonymity, confidentiality and withdrawal via email. Participants completed and returned a consent form to indicate their understanding and willingness to take part in the study. Once the completed consent form was received, the participant was contacted via email to arrange a convenient time for the video call. At the beginning of each call, the participant was reminded that the interview would be recorded and asked whether they would like to choose a pseudonym for the study. Following the interview, each participant was asked whether they had any questions about the research and were thanked for taking part in the study.

3.8 Interpretative Phenomenological Analysis

Phenomenological philosophy argues that the subject (or person) can not be removed from the real world (the object). The subject and object are interconnected by the subject's perception of the object. Further, the subject's perception can alter according to different contexts and different emotions. Therefore, there is not a definite measurable knowledge. Each individual will perceive the world in a different way and derive different meanings from events and experiences. As a result, phenomenological methods aim to study subjective experience and shed light on the individual's lived world.

The phenomenological approach to research aims to value the whole human experience and understand how personal meaning is informed by experience. In addition to meaning, relationships and specifically the role of the researcher in co-creating and interpreting meaning is acknowledged.

Interpretative phenomenological analysis involves rich descriptions of phenomena, which take into consideration personal, cultural and temporal contexts. These descriptions, when combined with the researcher's interpretation, can provide a deeper understanding of the person's phenomenological world.

The qualitative approach represents the belief that it is important to see each individual who takes part in the research as being-in-the-world; this includes their culture, their relationships, the language they use, and the meanings they make. Interpretative phenomenological analysis moves beyond simply describing somebody's experience and adopts a more interpretive approach in an endeavour to understand an individual's perspective and engagement with their world (Smith, Flowers and Larkin, 2009). The approach is founded on the phenomenological philosophy of Husserl (1999) and draws on the existential theories of Heidegger (2005) and Merleau-Ponty (2010) to provide an understanding of an individual's embodied perception of a particular experience (Smith, 2004).

Phenomenology is a centred philosophical understanding of conscious engagement in the world and meaning making. For centuries, philosophers have debated the conscious and whether consciousness is focused on awareness of self to inform thoughts and emotions (Husserl, 1999). Alternatively, philosophers have considered whether consciousness is combined in interplay with a person's external world, to develop perception based on lived experience. As a consequence, phenomenology does not centre on cognition, but more on experience, relationships (with others and the world) and meaning (Heidegger, 2010).

In the early twentieth century, phenomenological philosopher Husserl was openly critical of scientific claims that only objective knowledge was credible. Husserl wholly rejected positivist approaches to research. Instead, he believed that, in order to appreciate how an individual engaged with the world, it was fundamental to gain a subjective understanding of a person's lived experience. Nietzsche also argued that, from that same

stand point, it was impossible for science to be objective or value free. Even basic knowledge and descriptions involved some evaluation, based on an individual's concept of the world. Kierkegaard also believed that there are no definite or indisputable truths. He suggested that the rules inherent in objectivity (as perpetrated by science) were merely an illusion which served to relieve the uncertainty and anxiety that arise from not knowing. Nietzsche suggested that there are no true or definite meanings in the world. Meanings are constructed and imposed by people from their personal perspective. Each person's meaning of events or experience is therefore subjective and may differ from others.

Central to the philosophy of phenomenology is the tenet of intentionality. Rather than an intention to do something, intentionality in phenomenology relates to the consciousness and the intention to be conscious of the external world. For Husserl, the concept of intentionality related a person's consciousness of their surroundings or something (Husserl, 1983; Langdridge, 2007). Husserl also proposed the concepts of noesis and noema which underpin IPA. Noesis refers to the actual experience of senses actions, while noema refers to the feeling that those actions illicit. Husserl suggested that when a person notices an object or undertakes an action they often give a meaning to the action or the object that they view; by doing so, the object or action is given a personal value (Allen, 2013). Therefore, when an individual brings their intentionality or conscious awareness into an experience they develop a noematic interpretation (Bernet, Kern, and Marbach, 1999).

Heidegger (2005) believed that the way a person related to the world was fundamental to understanding and interpreting their experience. Heidegger's concept of *dasein* focused on a person's culture and social circumstances, believing that social and economic factors would influence how the person related to their world, their intentionality and the way they constructed meaning. Therefore, phenomenological research is principally focused on first person biographical accounts of lived experience. The

analysis of the narratives aims to describe the perceptions and understand the underlying meanings. Gadamer (1996) argues that understanding is created intersubjectively, between two individuals through speech and the experience of conversation. Whilst language provides a means to communicate perspectives and understanding, it is important not to dismiss or lose experience that is outside of language. By concentrating on language, it could be argued that consideration of the body has been absent from much psychological research. Phenomenological psychology actively endeavours to integrate and acknowledge embodiment in the qualitative approach.

Husserl suggested that, when interpreting the personal accounts it is important that the researcher is aware of what he termed 'epoché'. Husserl (1999) believed that everybody has a natural attitude to living. Their personal attitude contains their assumptions borne from experiences, along with prejudices and biases. Epoché is the awareness of bracketing off personal preconceptions as much as possible, so that the researcher can describe and understand the experience or 'things themselves' from the participant's phenomenological world as much as possible.

Heidegger disagreed with Husserl's concept of epoché. Heidegger argued that people were inseparable from their lived world and, therefore, it was impossible to effectively bracket off their perceptions and self when investigating a phenomenon. Each individual sees their world through an idiosyncratic lens which has been shaped by culture and personal history. As a consequence, rather than describe phenomena, it would be more appropriate to interpret the meanings in relation to the person and their lived world.

3.8.1 Acknowledging the Researcher's Contribution

In contrast to many qualitative methods, interpretative phenomenological analysis acknowledges that the themes and knowledge that come from the study are co-constructed between the participant and the researcher.

Rather than being a detached observer, the researcher responds reflexively to the experience shared by the participant (Lyons & Coyle, 2007). Therefore, it is fundamental that the researcher is conscious of the part that they play in the interpretation of the data. This reflexivity involves reflecting on their personal perspective, interpretation of the data, their own demographic background and to what extent the researcher was conscious of epoché during the interaction with the participant (Langdridge, 2007). The perspective of the researcher needs to be transparent and considered in the context of the study. A preface has therefore been included at the beginning of this thesis that reflects the perspective of the researcher and their position in this programme of research.

As each research interaction is unique, the researcher needs to have awareness of their own personal reactions and investments in the relationships. Reflexivity embodies the phenomenological concept of 'the self in relation to others' (Sartre, 1969). The researcher becomes an integral aspect of the research process and is, therefore, inevitably personally connected with the subject (Etherington, 2003). The intersubjective reflection enables researchers to identify mutual meanings which emerge from the research relationship. Working reflexively, the researcher takes responsibility for their interpretation and contribution to the co-construction of meanings.

They acknowledge their own thoughts, feelings, intuitions, values, meanings, presuppositions, prejudices and personal agendas and consider how these may influence their unconscious reactions to the material shared by participants (Finlay, 2004). Reflexivity additionally provides a means for the researcher to reflect on their impact on the interactions in the research setting and to incorporate their reflections in their interpretations (Finlay, 2004). As reporting objectively and writing in the passive voice can appear to distance the researcher from their work (Crotty, 1998), discussions of the qualitative studies were written

subjectively using the first person pronoun 'I' to show their active part in the constructivist research.

3.9 Analysis of Interview Transcripts

Traditionally, qualitative analysis involves perceiving the data and speaking about the data descriptively. IPA adopts a different approach, in that the interpretation of data is recognised as being informed by the researcher's subjective lens. Instead of trying to objectively create a theoretical framework or compartmentalising aspects, IPA embraces the human contribution. A hermeneutic process was used to reflect the person's experience, including their language and psychological factors which inform their account (Seebohm, 2004). Hermeneutic interpretation involved transcribing the participant's words from the audio files and analysing the text to identify unique meanings that participants placed upon their experiences (Thiselton, 2009). To deduce meaning and interpret the experience, the researcher actively engaged with the transcripts so that a combined understanding evolved (Langdrige, 2008). Successful interpretation, therefore, involved reading *within* the text to generate an understanding of the conscious experience of person and the subject matter (Smith, Flowers and Larkin, 2009).

As IPA is based on ideographic accounts, each transcript was analysed separately to fully interpret the complexity and detailed information that was provided by the participant (Smith, 2009). The analysis followed an iterative and inductive process:

1. Initially analysis commenced with a line-by-line analysis of words, experiential concerns, and personal understanding of boundaries.
2. Secondly, patterns were identified within the transcripts. This included subtle nuances, obvious convergence and divergence and commonality across cases.
3. Next, a framework or style was developed to show the connection between themes.

4. The data were collated in Excel, to allow cross-comparison of themes.
5. A narrative was developed, which included interview extracts, interpretation of the findings and a model to indicate how the process unfolded.
6. Finally, the researcher reflected on their own contribution to the process, their own perceptions and how they felt the data informed the proposed concepts.

The first stage of the hermeneutic process entailed an iterative process of reading and rereading each interview transcript in order to become immersed in the content. In addition, the recorded interview was closely listened to during the process of transcription (and subsequently), to remind the researcher of context tones of voice and emphasis that the participants had placed on certain sections of data. The interview transcripts and recordings demonstrated that the interviewer and participant had established trust and rapport during the interview process.

Each of the transcripts was examined in detail, concentrating on semantics and phenomena that the participant shared. In analysing the transcripts, the researcher was aware of their own beliefs and presuppositions whilst endeavouring to truly represent the person's lived experience of working with boundaries. The researcher read and re-read the narrative to gain a feeling for each individual account. Re-reading paragraphs helped the researcher to engage with the text and reflect on thoughts and comments that emerged. The left hermeneutic generated a large volume of commentary, gained by summarising, paraphrasing, considering associations and connections, suggesting interpretation, highlighting specific words, feeling a sense of the practitioner, repetition and contradiction (Smith and Osborne, 2003). The right hermeneutic related to concise phrases or words that summarised the comments in the left hermeneutic (see Appendix G). This entailed capturing the essence of the thoughts or comments, identifying key phrases or specific words that

reflected the content, interpreting psychologically and identifying theoretical relationships in the language used (Smith and Osborne, 2003). The transcripts were analysed in this way twice within two months. With an awareness that noema and noesis can change over time, the final analysis of transcripts was completed six months later, to establish whether intentionality remained similar. Many of the interpreted themes from the earlier hermeneutic processes were repeated.

Repetition of emergent themes was calculated and similar themes were amalgamated. However, a conscious effort was made to not minimise the complexity of the theme to ensure detailed connections and relationships were maintained. If it was felt that the comment could not be encapsulated by one specific theme, or was not clearly defined, more than one theme or phrase was generated in the right hermeneutic. Many themes were directly derived from the transcript and included language or words that the participants had used to reflect authenticity. The words and phrases related directly to aspects of working with and managing boundaries and signified the language that participants had used to describe their feelings about the experience.

The themes were then charted for each individual transcript and included on a spreadsheet which contained all themes. This gave a visual image of how the themes could be mapped horizontally across cases, as well as vertically for each individual participant. Using systematic reflection, the themes were analysed to identify common links and divergences within themes (Langridge, 2007). Many themes appeared to cluster together, although some themes needed additional review. These themes were used to re-code sub-ordinate themes. No themes were discarded or ignored. By moving backwards and forwards horizontally between the interview transcripts, a set of superordinate themes were recognised, which were representative of the whole dataset.

The themes from the interpretative phenomenological analysis of interview transcripts represent participants' experiences of identifying discrete areas

of practice and managing boundaries (see Appendix H). Two superordinate themes were identified that embodied the phenomenological experience of participants in the qualitative study. The personal accounts were integrated with the quantitative results from the survey to deepen understanding of novice and newly trained coaches' perceptions and experiences of working with boundaries.

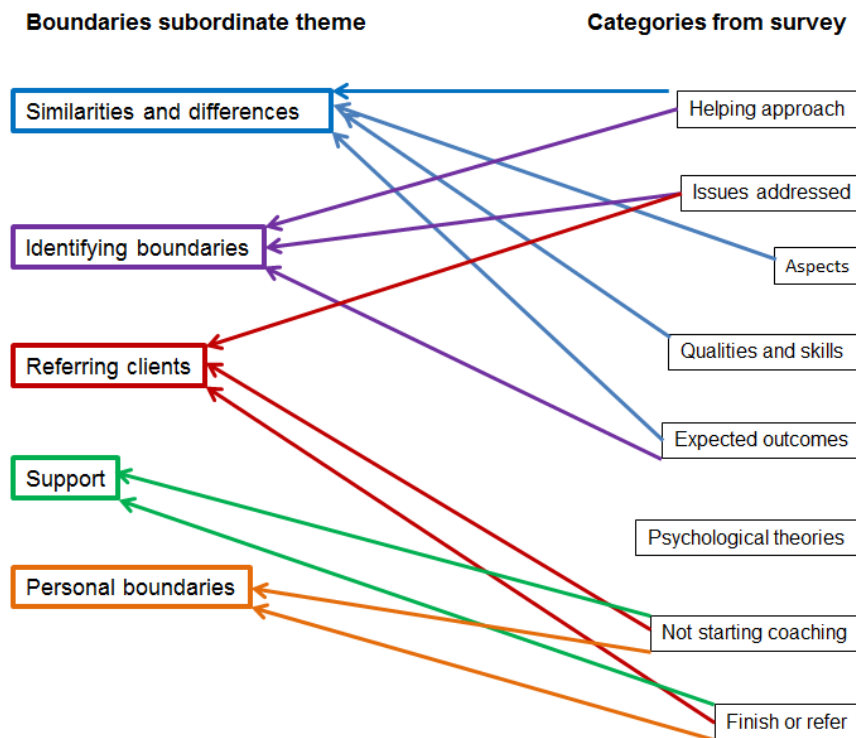
Themes from the mixed methods study extended beyond the anticipated focus of boundaries and incorporated an additional superordinate theme of knowledge, which included themes relating to participants' skills, training, competence and self knowledge.

3.9.1 Boundaries

The 'boundaries' superordinate theme encompassed novice and newly trained coaches' perceptions and concepts of boundaries between disciplines. The superordinate theme included subordinate themes of similarities and differences, identifying boundaries, referring clients, support, and personal boundaries. Analysis of participants' accounts reinforced results from the quantitative study and many factors from the categories measured in the quantitative survey were evident in the qualitative subordinate themes (see Figure 7).

In the *similarities and differences* subordinate theme, coaching was principally reported to be an action orientated, goal focused approach, suited to addressing work performance and personal growth issues. It was also largely associated with positive outcomes.

Figure 7 The 'boundaries' superordinate theme and survey categories



“It’s important that people are responsible for their own actions and come out with something more concrete to work with.” (Rebecca)

“Because it’s not this fluffy thing where you’re just having a nice conversation with someone, it’s about achieving results.” (Angela)

Counselling was viewed as more of a sympathetic approach than coaching. It was predominantly connected with reducing negative emotions, alleviating distress and in-depth exploration of personal issues.

“In counselling there is usually something that is a deeper focus, because often when people go into counselling it’s more of a healing process for them.” (Angela)

“So it may be a more reflective process, there may be a need to be more sensitive to what’s really going on with individuals at a deeper level and more non-directive than coaching.” (Rebecca)

Instead of differences, Esther highlighted similarities in the skills used to help clients.

“Well, in both case we are there to serve the other person, and I would say in both cases we’re there helping to get to an end point. Certainly both use the same skills of rapport, listening, challenging, questioning.” (Esther)

In light of the similarities between coaching and counselling, overlap in the perception of approaches was evident throughout the research. Indeed, interesting anomalies emerged which indicated inconsistencies in perceptions of boundaries between coaching and counselling.

“One of the things that... I’d talked over with my supervisor was keeping the boundary between the coaching I was doing and the counselling. And what’s really difficult is that, because the things that were going on for him personally have an impacted on how he is at work, then sometimes it does mean maybe straying into what are more counselling areas...” (Esther)

These findings may be due to the interpretation of the factor, where participants viewed the concept as enhancing performance or life experience, rather than improving mental health. Alternatively, the results may reflect novice coaches’ perceptions of working holistically with the individual, to help them achieve their potential.

“So [coaching’s] more positive in a way. That would be the difference. But now I think of it, counselling, the outcomes of counselling should be positive as well, so that’s where I’m very mixed. I don’t know.” (Rebecca)

“But I think that the difference between coaching and counselling is that if you’ve a spectrum of functioning then, and you’ve got abnormal, normal and optimal then you’d, counselling would take somebody from abnormal to normal and coaching would take somebody from normal to optimal.” (Sue)

The *identifying boundaries* subordinate theme focused on perceptions of mental health. Attempting to simply divide the population diametrically between mentally well and mentally ill is a matter for debate (as discussed in Chapter 2). Yet, this differentiation is the primary boundary referred to by novice coaches.

“Yeah, because if you go to a counsellor you, you’re asking for help, but I think coaching is a bit more, you want to change rather than you need someone to help you to change.” (Julie)

Participants also discussed the overlap between coaching and counselling. They recognised that there may be areas where the differences were not immediately apparent.

“...boundaries are very flaky, but I don’t know. There is a line somewhere but it’s so easy to cross it.” (Rebecca)

Ivy suggested that, in these circumstances, identifying the boundary was related to self awareness and whether the coach felt comfortable managing the issues.

“But it is a grey area and I think that if, that... for me there is quite a bit of overlap between coaching and counselling. But I think it is the skills of the coach to be constantly aware of where you are with the client and whether you’re still comfortable with it...” (Ivy)

Esther initially appeared to feel confident when describing where the boundary would lie when working with clients who experienced an acute

personal crisis. However, as she elaborated on her understanding, she became confused and unsure (the illustrative quote remains unedited to demonstrate the hesitation and confusion Esther expressed).

“But if somebody, if the, the purpose of the counselling where somebody had suffered bereavement or where somebody had been through a divorce, or where, you see if somebody was made redundant then you could go to counselling, you could go the coaching route. So it seems to be something of a more personal impact, no, I can’t even say to do with personality, because that’s true for both. I’m struggling with this.” (Esther)

Maybe some of the bias toward less than favourable stereotypes of counselling is due to a feeling that the remit for where counselling and coaching can be ethically practised is inequitable. There did seem to be a measure of antipathy and resentment in some accounts of differences and boundaries.

“There’s this idea that if you go to counselling there’s obviously something wrong with your mental health, or I don’t know, you have to deal with past events, discovering your issues or problems... whereas coaching is more like, well, it’s future orientated isn’t it?” (Rebecca)

Julie’s hesitancy, when trying to describe the boundaries and differences, may indicate a lack of self awareness and being able to effectively evaluate her skills or make confident decisions.

“Not very confident because they are quite similar, I think, just in the way that they’re set up, how like it’s two people and, I don’t know, I don’t think I would be able to notice it, but possibly if I was doing it.” (Julie)

The other participants seemed to initially be confident in their ability to identify boundaries. However, when deconstructing their decisions, certainty in the criteria used to identify the boundary diminished, evoking discomfort.

Sue's account highlighted her initial self-belief that she would be able to identify the boundary, followed by the immediate realisation that there was the possibility of stepping over the line and wandering into counselling territory.

"I think I'd be able to identify the boundary. I'd be quite confident in being able to recognise it, but being able to stay on the coaching side I think would be difficult." (Sue)

Rebecca's concept of identifying the boundary in practice seemed to centre on protecting her self and resisting any situation that would be difficult to manage or create discomfort.

"I would say any position that I would be in which makes me feel uncomfortable, that's where, when I know there's a boundary, because as far as I understood, coaching shouldn't be uncomfortable for the coach." (Rebecca)

Ivy openly admitted to finding the boundary difficult to identify. Ivy again appeared to favour relying on intuition to guide her impression of where the boundaries between coaching and counselling lay.

"The answer is I don't know. I think it's very much a question of using your common sense, your judgement and combined with a big dose of intuition." (Ivy)

Angela reflected on the experience gained in her previous role as a volunteer counsellor.

"I feel reasonably confident in recognising when there's a deeper issue. I suppose the, maybe the more difficulty with that would be

that I would feel possibly more confident than some people to explore it, which may be out of the boundaries that we're working with." (Angela)

Esther was unaware of inconsistencies when recounting two incidents with clients relating to depression and bereavement. Instead, she confidently stated that she would be able to identify mental health issues, although her previous explanation had belied her lack of knowledge or understanding.

The *referring client* subordinate theme highlighted the internal conflicts which arose in novice practitioners. Sue claimed that she would feel confident in referring a client who was experiencing distress or mental health problems, but then contradicted herself by saying she would want to maintain the relationship and work with the client, if she had the appropriate skills and training.

"I'd feel comfortable doing that. I'd want to do it myself, I'd want to keep them and just go into counselling instead of coaching, if I knew anything about counselling, but I would feel quite confident in referring them..." (Sue)

It is important that coaches only work within contexts that they have the skills and capabilities to manage. As Angela highlighted previously, coaches who also have counselling training need to be mindful of only providing a service for which they have been contracted. If they should wish to assist the client in examining psychological issues as a counsellor it would be appropriate to re-contract to remain ethical.

"In the contracting I always ask how much challenge they would like, because some people aren't always in a place where they want challenge, it's more using the coach as somebody to reflect and ask questions and give feedback on what they see." (Esther)

“Not at all, because in terms of contracting at the beginning, we’re clear that we’re there to talk about executive business related matters, and so I wouldn’t have a problem at all.” (Esther)

The *support* subordinate theme indicated the importance of trainees receiving supervision throughout their training. Rebecca’s experience also underlined the need for support through supervision, when managing emotions and personal boundaries in practice.

“I felt very uncomfortable. With [one client] I had a fantastic experience. She was [on the] same level, it really flowed; it was really easy to coach her. The other one was a bit more problematic, there was no eye contact, and it drives me crazy when I don’t get eye contact because it’s like they’re talking to somewhere else and there’s, you can’t really say anything.” (Rebecca)

The *personal boundaries* subordinate theme included experiences of personal investment in the coaching process and limited self awareness. As well as boundaries between approaches, difficulties maintaining personal boundaries were also apparent. Whereas trainee counsellors rely on supervision to help them manage personal investment and boundaries in practice, both Angela and Esther referred to feeling “drained”, frustrated and tired from their personal investment in coaching practice.

“Sometimes I might feel frustrated, I couldn’t do it 100% of the time, because it takes so much concentration, I think it would just be knacker to do it day in, day out.” (Esther)

3.9.2 Knowledge

This over-arching theme incorporates subordinate themes of training and skills, process, intuition, competence and self knowledge. Novice and newly trained coaches referred to the rigour of coaching and counselling education. Initially, Rebecca intended to describe the differences between counselling and coaching courses.

“Oh my, well, the counsellor would presumably be qualified and trained, and would base his, I'm saying things but I'm thinking, no, that kind of, you can get a masters in coaching now, you can get certificates in coaching now, but theoretically speaking a counsellor or a therapist should be trained, should be basing his structure and sessions and contents on model, on theory. Again with coaching, I don't know, they're really similar. They're really similar, I'm sorry.”
(Rebecca)

Rebecca's perceptions were challenged as she began to describe the differences and the confusion she felt was apparent when she tried to continue. Inconsistent training standards are a concern within the coaching industry. Indeed, the newly trained coaches were at pains to emphasise the credibility of their recent courses, which were accredited by academic institutions and provided postgraduate qualifications.

“In addition to that, the post graduate qualification, so that gave me an advanced certificate in business coaching and then to convert that into a post graduate qualification... I had to do some assignments in coaching.” (Angela)

The temporality of development was alluded to by all the newly trained coaches. They referred to past experience to contextualise their current knowledge and explain how their training would affect future concepts of coaching.

The newly trained coaches, Angela, Ivy and Esther, all identified the many models and strategies that had been included in their postgraduate training programmes.

“We also looked at contracting and the importance of contracting, and what models you use with your coaching, and how to prepare

yourself for coaching... other models for ego states, the drama triangle..." (Angela)

When describing the content of the newly trained coaches' programmes, the models and approaches that had been taught could not be readily recalled. As a result, Ivy and Mary both referred to a book or handbook that accompanied the course to reference.

"But let me think, the main thing was the, there's a book by, oh God I need to look at my books to just remind myself...." (Ivy)

"My handbook, just been given a huge handbook. So we did, what sort of things did we do?" (Angela)

However, frustration with rudimentary learning strategies was evident in novice coaches. Both Rebecca and Julie discussed learning theoretical frameworks.

"Well obviously it's one to one, it's, are they both structured in a way that you follow a model on the coaching and you follow a plan on counselling to go through a programme." (Julie)

Rebecca also expressed her desire to augment her learning with 'concrete' evidence.

"Some of the things weren't definite. Like I need to concrete, I need the concrete evidence to work with, kind of thing, not just theory."
(Rebecca)

As well as acquisition of knowledge, novice and newly trained develop and learn through practice. Whilst Sue had been enthusiastic about the notion of deciding what models and strategies to use, Rebecca found that she would have liked more direction or guidance. This may be due to the fact that Rebecca was a high achieving student who set exacting standards for

herself and wanted to deliver excellent outcomes. The lack of a specific framework made Rebecca uneasy, as did the lack of knowledge about what were the 'right' words to use or the 'right' way to frame a question.

"To be honest I think that I, we, could have maybe got a bit more information on the practical aspect of coaching, because we did get a lot of theory, we did get models, and we were directed to read on certain models. But I think in practice, I mean, I found myself at home on YouTube typing in coaching, this kind of coaching, that kind of coaching, executive coaching, just to get the feel of what it's like to see a, the interaction between a coach and the coachee. When we came to the actual coaching sessions with my peers, I felt like, in a way, you've got your theoretical, like I've got my GROW model, but how does, how do I turn it into actual words in front of a person?" (Rebecca)

In contrast to Rebecca's reliance on models and examples of practice, newly trained coaches shared their enjoyment of engaging in coaching practice and the benefits that practice in training provided.

"So really broadening, because we all had some experience of coaching, but it really broadened and deepened our knowledge, and there was a lot of practice as well." (Esther)

Ivy described her practice hours to build experiential knowledge and understanding.

"It was a good balance between intellectual and theoretical input and the level of candidates that, the pupils that were there and other participants and practical application because that was really important for me that I did a lot of practice." (Ivy)

Angela showed a reserved and sceptical approach to some of the creative and kinaesthetic methodologies offered in training, questioning how well

they would be received in executive coaching. Esther, on the other hand, embraced the creative side of using tools and interpretation to help clients develop an understanding of issues and demonstrated curiosity when discussing some of the approaches she had been introduced to. However, much of Esther's knowledge appeared to be superficial and, when asked about the psychological principles that underpinned one of the tools she had discussed, she did not know the origin of the images she was discussing, nor theoretical rationale. Ivy also showed curiosity in her approach to learning. Ivy had a clear, confident focus on the aspects she wished to enhance in her training and was aware of the benefits to both personal and professional development. Developing knowledge, practice skills and understanding of self are fundamental to formulating effective ways of working, extending a duty of care to the client and accepting ethical responsibilities.

In addition to learning specific frameworks and coaching models, the novice may need to develop an awareness of how their self can impact on the coaching relationship and outcomes. Managing emotional reactions to client disclosure was seen as challenging by two novice coaches. When describing instances of coaching practice, Rebecca expressed frustration and anger when one client disclosed information that she felt was not appropriate in a coaching context. Rebecca felt out of her depth and troubled as she didn't know how to manage the situation. Sue also experienced a negative reaction when her client didn't achieve her planned goal.

"I didn't tell her that it made me angry, but it made me really... like, I took it quite personally."

The experience seemed to have unconsciously affected the relationship between Sue and her client. Sue appeared to be unaware that, when describing an interaction with the client subsequently, she was negatively judgemental, deeming the client to have "some seriously weird irrational beliefs". In the accounts, Rebecca and Sue were oblivious as to how their

reactions may have influenced their clients' engagement with the coaching process.

A further concern relates to newly trained coaches' wish to use intuition in their coaching practice. Both Esther and Ivy described developing insight or intuition in practice. For Ivy, augmenting her coaching practice with intuition and a greater understanding of psychological principles was the main advantages of extended training.

“But what I really enjoyed was looking at all the different aspects of coaching and there is a rational and solution focused side to it, but there's also a psychological and emotional side to it and the whole development of intuition fascinates me. And I am, I'm, what I really would like to do is to further develop in psychological dimensions of coaching for me as a coach because I think that's where the added value lies for me.” (Ivy)

From Ivy and Esther's accounts, it could be appreciated that their aspiration was driven by a need to work instinctively and demonstrate fluidity in their coaching practice. However, intuition is developed from experience and practice, rather than an understanding of psychological models. This again indicated confusion about what capabilities can be attained on training courses and the difficulties of meeting trainee coaches' expectations.

3.10 Discussion

This study explored novice and newly trained coaches' perceptions of working with the boundaries between coaching and counselling. The mixed methods approach incorporated a survey, to gather a broad range of data, and qualitative accounts of novice and newly trained practitioners' experiences of working with the boundaries in practice.

To truly understand another person's perspective, it is necessary for them to explain their experience, their thinking and emotional responses in

situations (Jarvis, 2006). Each person interprets their experience based on previous perceptions and memories of similar situations. Developing an understanding of novice and newly trained coaches' perceptions of appropriate areas for coaching practice was one of the principal aims of this mixed methods study. Their experience of learning also helps to contextualise their views of helping approaches.

3.10.1 Training courses and learning experience

Purposeful learning is what many people refer to as learning. When a person seeks learning on purpose, they intend to acquire new skills, knowledge and attitudes which may affect their values and beliefs and emotions. Learning often entails adopting new perspectives and developing skills so that practitioners are better prepared and able to cope in new situations (Jarvis, 2006). Each of the people who shared their experience of learning had recently completed a university accredited course. The novice coaches had learnt about coaching and coaching psychology as part of their undergraduate psychology degree. The newly trained coaches had recently completed accredited postgraduate coaching courses. The importance of attaining a qualification, which had been accredited by a university, was highlighted by all of the newly trained coaches. Angela, Ivy and Esther all referred to the significance of their postgraduate training. Each one expressed how the standard of their qualification would be recognised by organisations, who would then have confidence in their knowledge and capabilities.

The complexity of endeavouring to determine consistency and confidence in training courses was reflected by Rebecca, when trying to differentiate between counselling and coaching courses. Initially, Rebecca described aspects of comprehensive counselling training that counsellors are required to complete in order to become accredited to counsellors. However, upon hearing her own words, Rebecca corrected herself as she realised that coaching courses were also accredited by academic

institutions and, therefore, could be seen to demonstrate credibility. Similar confusion was shown in the results from the quantitative survey.

The comprehensive training that counsellors undertake was recognised by a large majority (89.6%) of novice and newly trained coaches who took part in the survey. In addition, more than half (54.2%) perceived coaching courses as regulated. Whilst this may demonstrate that trainees have confidence in the content of training courses they have attended, they may erroneously believe that courses are regulated and the content is consistent across all training providers. This misunderstanding may arise due to the confusion related to accreditation and confidence in course content that endorsement by professional bodies implies.

Consistent standards and regulation of coach training has been identified as a concern by many practitioners (Hart, Blattner & Leipsic, 2001; Maxwell, 2009; Price, 2009; Jinks, 2010; Turner, 2010) (see Chapter 2). Initially, regulated training may appear to offer a solution to achieving consistent standards in coaching education (and thereby enhancing the reputation and credibility of the coaching industry). However, achieving consistency in practice skills and knowledge base for all coaching courses is problematic.

Entering a profession generally entails attaining a qualification in a relevant subject in higher education (Gray, 2011; Lane, Stelter & Strout Roston, 2014). University education programmes are subject to quality reviews by statutory bodies, with the content of courses meeting criteria stipulated by professional regulatory bodies (Bachkirova & Lawton Smith, 2015). The collaboration between academia and professional bodies ensures learners are provided with a core knowledge base for the occupation.

In contrast to many established professions, which recognise one single academic entry point, coaching has multiple points of entry due to the diversity of professional backgrounds (Lane, Stelter & Stout-Rostron,

2014). To accommodate the diverse backgrounds of practitioners, multiple professional bodies have been established to represent coaches' interests and develop the industry. Commercial coaching bodies have a vested interest in meeting the needs of their members. As a consequence, training criteria and course accreditation may be shaped by experience and skills from a multitude of areas, to reflect members' current abilities (Hall, 2009).

At the current time, the coaching industry does not have one overarching professional body that regulates course content, competencies and professional development. Instead, each professional body within coaching has developed their own accreditation system to reassure organisations of the professional integrity of coaching (Bachkirova & Lawton Smith, 2015) (see Chapter 1). As a result, it would not be possible to regulate training or ensure all professional bodies incorporate universal core content in their accredited courses.

To demonstrate the rigour and credibility of their recent training, the content of courses was discussed by all of the novices and newly trained coaches. Ivy described her interest in psychological models and theories learnt on the course. Additionally, Esther and Angela shared their eagerness to learn psychological strategies and models. However, when psychological models were discussed, Esther and Angela could not recall the theories they had learnt and referred to comprehensive handbooks that they had used on their courses to refresh their memories. Whilst developing an understanding of psychological concepts was valued by newly trained coaches, it would appear that the rapid delivery of courses may not have provided enough time or experience of using the models for them to internalise their learning. Instead, it would seem that the models had not been understood. As a consequence, it was unlikely that psychological principles could be applied in practice.

In contrast, novice coaches had a good understanding of psychological theories and models attained from two years of study on their

undergraduate degree programmes. Their experience of education may have influenced their perception of coaching practice as needing structure and evidence to support effectiveness of coaching strategies. Each of the psychology undergraduate degree programmes was accredited by the British Psychological Society and incorporated criteria for course content stipulated by the professional body. Rebecca discussed understanding how psychological theory informed coaching practice. Her frustration was evident when explaining her need for something 'concrete' to provide assurance of how effectively these were actuated in practice.

The desire for structure and a 'need to know' was apparent in the testimonies of the novice coaches. Their accounts supported the theory of Bransford, Brown and Cocking (2000), that novices tend to focus on particular facts or techniques related to their coach training. Therefore, when encountering novel situations that challenge their understanding, they felt challenged and were not confident in the appropriate actions to take (Jarvis, 2006). In addition, it could be suggested that feeling ill-prepared challenges their sense of self and the breadth of their knowledge. As a result, they may feel discomfort both cognitively and emotionally, leading to dissonance or disjuncture (ibid).

It could be argued that practitioners develop confidence in implementing strategies as they gain more experience in practice (Donati and Watts, 2005). In addition, skills and knowledge may be augmented by discussing issues with peers and observing how others manage issues in similar circumstances. Gaining practice experience and working with peers additionally offers an opportunity to try out new approaches to solving problems (Hansman, 2001). Sue and Rebecca explained that they had acquired their knowledge and had practised their skills in peer coaching interactions. Therefore, the limited practice the novice coaches experienced may not have provided enough opportunity for novice coaches to become confident in their competence. Consequently, they questioned their abilities to identify appropriate solutions.

All of the newly trained coaches expressed how they had enjoyed gaining practice experience during their coaching course. Both Ivy and Esther emphasised how their engagement in the practical aspects of their coaching course had deepened their knowledge and understanding. In contrast to the scientific and academic focus of the undergraduate novice coaches, the newly trained coaches had been introduced to a broad range of tools and techniques in their learning experience. Esther enthusiastically described the materials and kinaesthetic approaches that had been used to help conceptualise situations in coaching practice. She described her enjoyment of working with cards to help clients gain a deeper understanding of their self and their systemic relations with others in the working environment. When I discussed the nature of the cards with Esther, it appeared that the cards reflected Jungian archetypes. However, Esther was unaware of the psychological concepts behind the images and had used the aesthetically attractive pictures metaphorically to generate insight. Angela, on the other hand, had not found the techniques which encouraged creative engagement and interplay to be appropriate in a business environment. She felt that tools and toys were inappropriate and would not enhance her professional identity. Angela's need to portray a professional image of coaching was reinforced by her description of coaching practice. Angela emphasised that coaching was more than 'a fluffy chat', instead accentuating the constructive professional relationship.

Demonstrating professionalism and identifying the parameters of coaching practice were discussed by Esther and Angela. Esther, in particular, emphasised the importance of contracting to establish expectations of what would and would not be addressed within the coaching context. Angela also described how the contract could be used to focus attention on goals rather than exploring personal issues. It appeared that the newly trained coaches used the contract to create a frame around their practice. If clients then discussed issues that were not identified within the contract, both Esther and Angela felt comfortable in referring their clients to their contractual agreement.

3.10.2 Intuition

The desire to appear professional and use intuition in their coaching practice was highlighted as one of the motivating factors in engaging in a postgraduate coaching course by Ivy and Esther. When people feel confident that they know themselves well, they are more likely to trust in using self knowledge as a guide. This leads to a self-perpetuating pattern of behaviour, as people who make decisions based on their true self values are more likely to be satisfied with the choices they make. As a consequence, when making choices from a variety of options, they may feel better decisions reflect who they truly are (Schlegel et al., 2012).

However, whilst people believe they have a good understanding of themselves, personal insights have been shown to be inconsistent and not as good as lay theories may suggest. For instance, people are quite unaware of the way they ostensibly behave or how they make decisions. Indeed, it could be said that an individual's ability to accurately evaluate their skills or behaviour is often far less than intuition would commonly indicate (Dunning, Heath & Suls, 2004; Dunning, 2013). Instead, it could be suggested that, without extensive knowledge or skills to draw on, trainees or novices are more likely to refer to lay theories or 'common sense' approaches to inform their decisions and ways of working (Skovholt & Ronnestad, 1996). Intuition tends to be based on knowledge gained from experience, which may represent a concern. New coaches' knowledge may be fragmented and limited. As a consequence, the novice and newly trained coaches may dismiss important or relevant factors and give other aspects more value than they deserve when making decisions (Myers, 2002).

3.10.3 Identifying boundaries

Novice and newly trained coaches' perceptions of the differences in coaches' and counsellors' ways of working were investigated both quantitatively and qualitatively. In interviews, novice and newly trained coaches described coaching as positive, growth orientated, focused on

personal improvement and achievement of goals. These perceptions corresponded to the findings from the quantitative survey. Results from the questionnaire indicated that the majority of respondents viewed coaching as present and future orientated (96.9%), dynamic (84.7%), flexible (93.9%) and providing quick results (95.8%). Coaching was viewed as an appropriate helping approach for people who were high functioning individuals (86.6%), people with good mental health (93.9%) and people with mental health problems (33.3%).

Counselling, on the other hand, was reported as primarily working with dysfunctional individuals (93.8%). Counselling was also seen to be beneficial for people with average mental health (45.9%) and people who had positive mental health (43.3%). Rebecca perceived counselling to be a reflective process which focused on the client's history and explored psychological issues in depth. From the survey, it was apparent that many novice and newly trained coaches believed that the counselling approach was more appropriate for helping people with distress (90.7%), anxiety (87.8%), depression (96.7%) and anger (89.8%). The testimonies from novice and newly trained coaches expanded on these perceptions.

Esther shared her view that counselling was a more sympathetic and sensitive approach which focused on healing, but equally could be challenging. The idea of challenge and responsibility was also shared by Rebecca in a coaching context. The client's responsibility within the coaching interaction was felt to be very important. Rebecca discussed the responsibility of the client in taking action to achieve their goals and bringing appropriate content to the coaching interaction.

Rebecca also felt that, by seeking counselling, people could be viewed as having 'something wrong'. These negative views of counselling may be an artefact of the societal stigma attached to mental health issues.

Interestingly, Rebecca's negative perception of counselling appeared to be transformed when discussing the outcomes expected from both helping approaches. Initially, Rebecca intended to stress that coaching focused on

positive outcomes as a means to differentiate between the approaches. However, as Rebecca heard her own words, she adjusted her explanation and acknowledged that counselling equally aimed to achieve positive outcomes for the client.

Esther felt that both helping approaches served their clients and implemented similar skills sets. All of the novice and newly trained coaches corroborated that there were many similarities in the rapport developed in the relationship, listening skills and questioning techniques. These beliefs were also supported by the findings from the survey, where respondents additionally reported perceiving helping approaches equally for empathy (82.7%) and respect for diversity and difference (92.9%).

Identifying differences in approaches was more challenging. When asked to define the differences, Ivy initially tried, but then corrected herself when she found that she was in fact describing similarities. Building on the underlying foundation of both coaching and counselling, Julie used the word 'help' in different ways to describe the difference between approaches. When discussing coaching, Julie related the impetus to motivate individuals to take action, whereas in a counselling context help inferred that help was emotionally supportive.

The large majority of respondents indicated that counselling would be the most appropriate approach to help people experiencing psychological dysfunction (93.8%). Interestingly, increased self awareness and self esteem were marginally more associated with coaching. In addition, a strong majority (92.9%) indicated that 'improving functioning' were more strongly associated with coaching than counselling. These outcomes are traditionally associated with counselling (Joseph, 2006). These findings would, therefore, appear to indicate how positive perceptions of coaching may have influenced participants' interpretation of enhancing performance rather than consideration of improving mental health. Alternatively, the perceptions may indicate confusion.

It can be seen that novice and newly trained coaches expressed the view that there were many similarities in techniques and methodologies that blurred the boundaries (Maxwell, 2009; Price, 2009). Indeed, as both coaching and counselling encompass a broad range of approaches to helping clients, it could be argued that the similarity of techniques and methods used confounds the definition of a boundary between the disciplines (Campbell, 2001; Hart, Blattner & Leipsic, 2001; Price, 2009). Indeed, trying to define specific factors associated with coaching, as distinct from counselling, is fraught with difficulties. The vagueness of the boundaries suggested in literature has led to a frustration and misunderstanding by both within the field and new professionals approaching practice (Bachkirova, 2007).

Identifying the boundaries between coaching and counselling was particularly confusing for novice and newly trained coaches. Ivy described the boundary as a grey area with significant overlap between the helping approaches. Ivy indicated that she would be comfortable working with issues that clients brought to the session and would identify the boundary between coaching and counselling needs instinctively. However, without counselling training and psychological knowledge, instinctive decisions would be based on personal experience and interpretation rather than specific knowledge and understanding. Rebecca also discussed the overlap between coaching and counselling and described the boundaries as 'flaky' and 'easy to cross'. Rebecca explained that she relied on feeling or instinct to identify the boundaries. She reported that her main indicator of where the boundaries lay was when she felt outside of her comfort zone. Rachel's experience illustrated the phenomenological concept of the body-subject and how people experience the world through their body (Merleau-Ponty, 2012). Phenomenological awareness of the self is generally perceived to reflect perception of the way the person thinks, behaves and feels in different contexts (Carlson, 2013). With such variable criteria, it is difficult to have confidence in novice and newly trained

coaches' ability to consistently identify when clients' needs would be more appropriately addressed in counselling.

3.10.4 Competence

The majority surveyed believed counsellors have the ability to recognise mental health problems (97.9%), in contrast to 17.9% who believed that coaches would also be able to identify mental health issues. However, these findings were inconsistent with perceptions of managing mental health issues in practice. Survey questions related to commencing and terminating coaching had been incorporated from a measure developed by Price (2009). These items had been included to allow comparison of results to contextualise outcomes. In respect of mental health concerns, the outcomes from the novice and newly trained coaches' survey showed many similarities with the study of executive coaches (Price, 2009). When asked whether the coach would decide not to start coaching if 'the client appeared to have mental health issues', 57% of executive coaches agreed (*ibid.*) in comparison to 42.3% of new coaches. Additionally, in response to 'the client's goals were more about addressing psychological problems than improving well-being or performance at work', 47% of executive coaches (*ibid.*) and 43.2% of new coaches indicated they would not start coaching. Further, in response to the item 'the work was likely to be outside my field of competence', 48% of executive coaches (*ibid.*) and 49.5% of new coaches agreed.

Furthermore, when responding to items that reflected reasons for finishing coaching, 66% of executive coaches (Price, 2009) and 60.8% of new coaches indicated that they would finish coaching if 'the client appeared to have mental health problems'. When asked whether they would terminate coaching if 'the client needed more psychological support than is normal in coaching', 51% of executive coaches (*ibid.*) and 49% of new coaches agreed. Additionally, 56% of executive coaches (*ibid.*) and 60% of new coaches reported that they would finish coaching if 'I felt I was moving out of my field of competence'. However, reflecting the theoretical premise

that coaching is future focused, only 29% of executive coaches (ibid.) compared to 46.7% of new coaches agreed that they would finish coaching or negotiate a therapeutic contract if 'the work became past rather than future orientated'.

These figures represent considerable concerns. Initially, when evaluating the outcomes from the survey, I had interpreted the findings as novice and newly trained coaches' possible unconscious incompetence and lack of awareness of the limits of their abilities. Indeed, the challenges faced by novice and newly trained coaches were illustrated by the accounts of Sue, Angela and Esther. Sue indicated that she would be confident in referring clients if she felt she did not have the skills to help them. However, she then added that she would not like to refer her clients, but would wish to continue working with them to help them resolve their problems. Angela also stated that she felt confident in identifying when a client may be executing mental health problems, due to her previous volunteer counselling experience. She added that, whilst this was beneficial, her confidence may lead to her to encroach on areas that may be more relevant for counselling support. As mentioned earlier, Esther had considered working with many emotional problems with her coaching clients. Some of the issues described could be interpreted as requiring additional counselling support, which Esther did not have the skills or abilities to provide.

On further reflection, it would appear that experienced coaches showed a similar willingness to work beyond their competence and engage with clients who appear to have mental health problems. This is of particular concern. Working with people who experience mental health difficulties may be appropriate for coaches who have a background in counselling or knowledge of counselling skills and abilities. However, new coaches and coaches who have not had appropriate training may find it difficult to identify the limits of their abilities. As a consequence, they may find

themselves in difficult situations, lacking the confidence or understanding of how to manage emotional reactions and their own personal boundaries.

3.10.5 Managing difficult issues

One of the most illuminating findings from the survey focused on novice and newly trained coaches' perceptions of distress and stress. These constructs show many similarities. However, it could be argued that distress is more likely to indicate underlying psychological difficulties, whereas stress may be related to work or life pressures. Most participants (85.6%) associated relieving distress with counselling. However, a significant number (41.2%) also felt that this could be addressed in coaching. In addition, over half (57.7%) reported that reducing distress was an expected outcome for coaching.

Explanation for these findings may be found in Esther's account of working with the whole person in a coaching context. Esther described accommodating many life crises such as divorce, bereavement and redundancy within a coaching context. These life events are likely to cause stress and distress. Reflecting on my personal experience as a bereavement counsellor, I questioned whether novice and newly trained coaches, who did not have counselling skills, would have adequate capabilities to manage issues of loss effectively. Indeed, in the quantitative survey, problems related to bereavement were perceived to be more suited to counselling by the majority of respondents (98.6%).

Working with emotions was strongly associated with counselling in the quantitative survey. The majority (88.8%) stated that the clients' feelings would be explored in counselling. However, over half (57.1%) felt that exploring emotions and understanding thoughts and feelings (55.7%) could be addressed in coaching. Indeed, Esther confidently asserted that she "wouldn't run away from dealing with somebody who had strong feelings about something related to work". Indeed, results from the survey indicated that many participants believed that anger (50%), aggressive behaviour (42.4%), and passive aggression (51.5%) were issues that

could be addressed in a coaching context. Whilst coaches may encounter anger (Wales, 2003) in clients, the behaviour may present challenges for novice and newly trained coaches, whose training may not have provided the skills or support to manage these issues effectively in practice.

It could also be suggested that emotions also play a significant part in the learning process. When a person is challenged by a novel situation, where they do not feel they have the skills or abilities to manage, this may be experienced as a challenge to their self and self-confidence. At these points of disjuncture, people may react emotionally (Jarvis, 2006).

Rebecca and Sue described their own emotional responses when coaching clients. Both shared experiences of becoming angry when their personal expectations of the client had not been met. For Rebecca, her discomfort and frustration had arisen from a lack of personal interaction. Sue, on the other hand, personalised the clients' failure to achieve their goal.

3.10.6 Self awareness & support

In addition to theoretical and practical knowledge, Rebecca, Sue, Julie and Esther demonstrated a need to gain self knowledge. Research has shown that trainees may be unaware of how aspects of their self may influence or affect their professional actions (Donati and Watts, 2005). This was evident when Rebecca revealed that she had reacted emotionally when a client had challenged her personal values. Rebecca appeared to be unaware of how her behaviour may have affected the coaching relationship and client engagement with the coaching process. In addition, Sue also seemed to lack awareness of how her negative value judgements may have had a subsequent impact on her interactions with her client. Being able to manage and contain emotions in practice is dependent on the coaches' reflective skills and awareness of protecting their personal boundaries (Day, DeHaan, Sills, Bertie & Blass, 2008b).

To improve self-knowledge, it is important to be aware of biases and blind spots. To fill the gaps and blind spots in self knowledge, people may need

the input of others to provide a different perspective, observations of behaviour and further information (Bollich, Johannet & Vazire, 2011). Supervision can provide trainees with valuable feedback to heighten self knowledge. It could, therefore, be suggested that the novice and newly trained coaches would benefit from on-going support in regular supervision to enhance their personal and professional development.

3.10.7 Reflections on the research process

When interviewing Julie for the qualitative study, I was struck by her lack of confidence and was aware of the impact of my presence in the interview. Whilst Julie had readily volunteered to take part in the interview, I considered whether being seen as a part of the university had inhibited her recollection of coaching experiences or the personal opinions shared in her qualitative interviews. At the time of talking to Julie, I was aware of an unconscious power dynamic which was unintentional on my part and, despite endeavouring to demonstrate a relaxed approach to discussing issues, this obstacle was not overcome. Julie's testimony was rather stilted, as she gave factual or theoretical answers and shared little self knowledge or self awareness in her opinions and perceptions. As a consequence, analysing her interview transcript presented challenges when trying to interpret underlying meanings.

3.1 Chapter summary

This chapter reported the results from the mixed methods study of novice and newly trained coaches' perceptions of the similarities and differences between coaching and counselling. The study described the quantitative results from a survey of novice and newly trained coaches and integrated the phenomenological experience of novice and newly trained coaches who took part in qualitative interviews. The research made a unique contribution to the understanding of new coaches' experiences and perception of working with the boundaries between coaching and counselling in practice. The credibility of coach training was discussed by participants in the qualitative interviews. The new coaches explained the

importance of attending an accredited coach training at university and described developing an understanding of psychological knowledge to inform their practice. Whilst the novice coaches had developed their psychological knowledge over time on their undergraduate degree course, newly trained coaches had gained their understanding from the postgraduate training course. Findings from the mixed methods study illustrated novice and newly trained coaches' challenges when defining differences between coaching and counselling and identifying hypothetical boundaries. Working with intuition was highlighted as important to newly trained coaches. Additionally, working with psychological problems was considered and confusion related to working within competencies was revealed. The outcomes also demonstrated the need for new coaches to enhance self awareness in supervision following qualification. The implications of these findings are discussed in Chapter 6.

Chapter 4 reports the second study in this research programme. This research expanded upon the findings of the novice and newly trained coaches' study and explored the perceptions of experienced coaches, counsellors, coaching psychologists and counselling psychologists.

Chapter 4 Experienced Practitioners' Survey

In the previous chapter, novice and newly trained coaches' experiences of identifying and managing boundaries between coaching and counselling in practice were discussed. The challenges of applying recently attained knowledge, working within competence, and using intuition to inform decision-making were also considered. Whilst these challenges may be representative of novice practitioners, it is likely that perspectives may change as practitioners gain experience. Little is known about experienced coaches', counsellors' and psychologists' experience of working with the boundaries between coaching and counselling in practice. This chapter will consider the knowledge and experience that coaches draw on to inform their decisions when identifying boundaries and applying boundaries in practice. The rationale for the study will be discussed and the outcomes from a pilot study and the full survey of practising coaches, counsellors, coaching psychologists and counselling psychologists will be presented. The implications for training needs and further research will also be discussed.

4.1 Introduction

Previous studies have investigated coaches' practices, training, education (Grant & Zackon, 2004; Bono, Purvanova, Towler & Peterson, 2009; Jenkins, Passmore, Palmer & Short, 2012) and working with boundaries (Whybrow & Palmer, 2006; Spence, Cavanagh & Grant, 2006). In addition, the challenges of critical moments in practice have been considered (De Haan, 2008b; De Haan, 2008c) and the importance of ethical practice and supervision has been discussed (Passmore, 2009; Whybrow & Palmer, 2006).

4.1.1 Coaches' Experience and Knowledge

Coaching is a practice-based approach to helping others grow and develop (see Chapter 1). As coaching practice has evolved, strategies and psychological models from counselling have been adapted and applied in

a coaching context (Popovic and Boniwell, 2007). Psychological theories can be seen to enhance confidence in coaching and provide theoretical frameworks to underpin practice (Whybrow & Palmer, 2006) (see Chapter 2). Indeed, many coaches regularly draw on psychological models which originated in psychotherapy to help clients (Bachkirova & Cox, 2005).

Whilst psychology brings many important theories and frameworks to coaching practice, coaching is also informed by a diverse range of professions (Whybrow & Palmer, 2006) (see Chapter 2). The diversity of tacit knowledge professional practitioners bring to the discipline enriches practice and understanding (Grant & Zackon, 2004). Indeed, as there are no specific requirements for training or barriers to coaching, many rely on their prior professional experience and tools to guide their practice (Spence, Cavanagh & Grant, 2006).

Experts develop specific domain knowledge and understanding through explicit and implicit learning (Simon, 1992; Kahneman & Klein, 2009). Drawing on their experience, practitioners can evaluate a range of options or possible strategies and rely on experience of previous successes and knowledge gained over time to inform decisions and identify solutions (Scaturro and McPeak, 1988; Lane & Corrie, 2009). Practice, therefore, includes problem-solving and elements of repetition, duration and clear feedback to develop the schemas necessary for effective intuitive decision making (Dane & Pratt, 2007).

Experienced practitioners often utilise their schema, heuristics and intuition in practice. Heuristics allow people to compartmentalise information into cognitive shortcuts. By developing efficient heuristics, practitioners are able to make systematic deductions and decisions (Lane & Corrie, 2009). Their repertoire of schemas can then be unconsciously accessed to inform recognition primed decisions (Simon, 1992; Kahneman & Klein, 2009). It has been suggested that practitioners use their tacit knowledge of the domain; they could then mentally represent the situation to evaluate whether the option would work in the current situation. If the

option was seen as the most suitable, it would be implemented. However, if the chosen option was inappropriate, the action could be amended or an alternative would be evaluated until a plausible solution was identified. As a result, some professionals make intuitive decisions that are remarkably skilled. However, in uncertain conditions people choose from a range of speculative options. As a consequence, preferences may not always be rational and judgements may be inconsistent and flawed (Allingham 2002; Kahneman & Klein, 2009).

Professions that employ standard methods with regulation, consequences for error, and provision of clear feedback are likely to build expertise (Kahneman & Klein, 2009). However, professional environments which are less consistent may generate intuitions which are prone to error. For instance, studies have shown that professions such as clinical psychologists, psychiatrists, personnel selectors and intelligence analysts had less opportunity to identify cues or develop skills due to variability in experience, unpredictability of outcomes and lack of good feedback (Shanteau, 1992). As a result, professionals may develop expertise in some areas and not in others, leading to fractionated expertise (Kahneman & Klein, 2009). In addition, professionals may find themselves in situations where they need to work on tasks that they do not have experience of and have not had the chance to master. In these instances, experts may attempt to use their expert knowledge in a context in which they have limited knowledge.

Development of intuition can be influenced by self-awareness, practice, motivation and how engaged a person is with using intuition. Indeed, experiential learning involves emotions as well as cognitions (Kolb, 1984). Therefore, intuitions are not simply based on a cognitive schema, but also the idiosyncratic judgements practitioners make in different situations (Lane & Corrie, 2009). As a result, some people may develop skilled intuition more readily than others (Kahneman & Klein, 2009).

From research, Mavor, Sadler-Smith & Gray (2010) found that coaches frequently referred feelings of self-confidence or certitude in trusting their intuitive feelings. However, as evidence has shown, this self-assurance may be illusory and reliable intuitive decisions often are dependent on many years of developing expertise. When professionals work in irregular or unpredictable environments, it can be difficult to develop true skills. In addition, professionals may be required to work in areas where they have no knowledge or prior skills. It is, therefore, difficult for the professional (and possibly their clients) to determine the boundary to their expertise. Further, the fractionation of expertise may lead to overconfidence in intuitive judgements, which may be successful due to chance rather than skill (Kahneman & Klein, 2009). Therefore, it could be argued that intuition should be used with caution in unfamiliar circumstances, or when stretched to personal competence limits.

4.1.2 Managing Boundaries

Coaching helps people to identify and actuate change. Coaching is often based on the premise that clients are robust, healthy and do not exhibit mental health difficulties or distress (Spence, Cavanagh & Grant, 2006). Indeed, the ICF (2002) presumes that clients that seek coaching are capable of managing and adequately expressing their emotions – because ‘coaching is not psychotherapy’. However, coaches frequently encounter mental health problems such as depression and anxiety in practice (Spence, Cavanagh & Grant, 2006). As a consequence, coaching could take the form of a helping relationship that is similar to counselling, but more acceptable within organisations (Price, 2009). It is, therefore, important that coaches are aware of working within their abilities and knowledge base.

The premise that coaches only work with mentally healthy people does not accommodate the complexity of individuals. Potential clients may be at risk due to undisclosed mental health difficulties. Indeed, it could be argued that working with vulnerable clients in a coaching context could be

counter-productive, if not detrimental, to a client's well-being (Berglas, 2002; Cavanagh, 2005).

Making decisions relating to managing mental health, based on intuition, are of particular concern in coaching (see Chapter 3). Whilst some coaches may have gained coaching skills from training in commercial training schools, most use tacit knowledge from experience in other professions (Whybrow & Palmer, 2006; Price, 2009). Further, although many coaches claim to have a good understanding of psychology, few that have joined the profession from business will have gathered prior experience in helping professions (such as social work, nursing and counselling) or completed formal training (Spence, Cavanagh and Grant, 2006).

Buckley (2007) argues that it is often difficult to accurately identify mental health issues. It is, therefore, difficult to ascertain what cognitive schema coaches would use to recognise mental health problems or assess their own ability to work with the clients. Coaches with therapeutic training are likely to be capable of assessment, but may additionally be faced with the challenge of deciding whether to manage the identified issues within the remit of the contract, or to refer to another professional service.

As discussed in Chapter 2, coaching practitioners have identified a need to develop a greater awareness of the differences between counselling and coaching and frequently try to emphasise the distinctions between the helping approaches (Grant, 2003; Grant & Zackon, 2004; Bluckert, 2005). Whilst many coaches and counsellors believe that there are boundaries between the two helping approaches, there are significant difficulties in identifying consistent boundaries. In previous studies, practitioners indicated that they relied on contextual or intuitive judgements, rather than theoretical propositions, to define where boundaries between coaching and counselling lie (Price, 2009). Indeed, many of the proposed boundaries are largely contested and frequently described as blurry (Grant & Zackon, 2004) and fuzzy (Jopling 2007). Indeed, many counsellors

believe that coaching is not so different from the area of practice. Coaching draws on many psychological principles derived from person-centred, cognitive behavioural and solution focused counselling approaches. Therefore, counsellors and counselling psychologists may use similar skills in their day-to-day work and may be tempted to extend their practice with coaching strategies to enable their clients to grow and develop (Hart, Blattner & Leipsic, 2001; Naughton, 2002). Additionally, counsellors may choose to expand their practice and utilise their skills and abilities as coaches (Alves-Marques, 2006; Jopling, 2007) or practice both approaches concurrently (Griffiths & Campbell, 2009).

The variety of experience and approaches embedded in practice suggest that coaching is inherently complex, which may lead to consumer confusion. Due to the diversity of approaches, the general public may not understand the nature of coaching and, as a result, may choose an inappropriate means to support and help them in their development (Grant & Zackon, 2004; Spence, Cavanagh & Grant, 2006). In addition, clients with mental health issues may endeavour to mask their problems in coaching practice (Spence, Cavanagh & Grant, 2006). Research by Green, Oades and Grant (2005) and Price (2009) suggests that individuals may engage with coaching to circumvent counselling and avoid the stigma associated with mental health and therapy (see Chapter 2).

4.1.3 Ethics and Supervision

The EMCC code of ethics (2009) stresses the importance of coaches working within their competencies and referring clients to therapy or counselling where appropriate. Ethical frameworks offer guidance for ethical dilemmas and aim to prevent dangerous practice which may cause harm to clients. Due to the involvedness of working with people, many coaches may consciously or inadvertently be practising a form of therapy (Price, 2009). Coaches, therefore, need to be mindful of their ethical responsibilities to clients and only work within their competence (Grant & Zackon, 2004).

Ethical codes are based on common themes of autonomy, truth, confidentiality, do no harm, beneficence, justice and respecting the rights of others. Most coaches have strong principles based on their own personal beliefs and values. However, most do not consider how these values fit with ethical codes and how they may influence personal interpretations of guidelines (Passmore, 2009).

Coaches have an ethical and moral obligation to their clients. This duty of care suggests a burden of responsibility on the coach to work within their competence and do no harm to their client. As a consequence, there may be legal ramifications should the coach practice outside of their area of expertise, or not show due diligence if a client indicates suicidal ideation or significant mental distress (Spence, Cavanagh & Grant, 2006; Passmore, 2011).

Research suggests the most valued qualities in effective coaches are self-awareness, core coaching competences, an understanding of ethics, and management of coaching relationships (Passmore & Fillery-Travis, 2011), with experienced coaches being viewed as calmer and demonstrating more sensitivity. The supportive relationship additionally affords practitioners the opportunity to develop self knowledge and insight (Bachkirova, 2011). Whilst some experienced coaches may reject supervision as an unnecessary means of control and regulation (see Chapter 5), within counselling and psychology practitioners are required to undertake regular supervision as part of their conditions of registration (Whybrow & Palmer, 2006). Supervision can also help to protect and safeguard practitioners. It could, therefore, be argued that reflecting in supervision helps coaches develop more effective actions and actively engage with clients (De Haan, 2008b).

4.1.4 Rationale

Previous research has focused on understanding the training and practices of coaches (Grant & Zackon, 2004; Spence, Cavanagh & Grant, 2006; Whybrow & Palmer, 2006) and the experiences of counsellors

transitioning to coaching practice (Alves Marques, 2006; Hart et al., 2001). However, there is scant research that reflects the practitioners' quandary of negotiating the boundaries between coaching and counselling in practice (Maxwell, 2009; Price, 2009). The aim of the research was, therefore, to investigate whether coaches and counsellors share collective views of boundaries in practice, how the boundaries are identified and how experienced practitioners manage the boundaries between counselling and coaching.

The study aimed to understand coaches' and counsellors' professional experience, training, abilities, views on common boundary definitions and experiences of identifying and managing suggested boundaries between coaching and counselling in practice. Disclosure of ethical guidelines and engagement with supervision was also addressed. By gathering the collective views of coaches and counsellors, the research makes a unique contribution to the understanding of coaching and counselling practice and practitioner perspectives of identifying and working with boundary issues.

4.2 Methodology

4.2.1 Pilot study to assess feasibility of measure developed for the experienced practitioners' study

A pilot study was conducted to estimate variance in data and assess the content of a measure designed for use in the second study in this programme of research. The pilot provided the opportunity to evaluate the study for feasibility before recruiting participants on a larger scale.

4.2.1.1 Objectives

The feasibility criteria for the pilot study focused on five specific objectives:

1. Provide primary data to assess variance in outcomes.
2. Identify any practical issues in completing the questionnaire.
3. Assess whether the measure is appropriate, e.g. wording, range of questions, identified categories.
4. Confirm time taken to complete the survey.

4.2.1.2 Ethics

Ethical approval for the pilot study and the survey of experienced practitioners' perceptions of the boundaries between counselling and coaching was given by the Department of Psychology Ethics Committee at the University of Bedfordshire. Participants were advised that participation in the study was voluntary and they were able to withdraw from the study at any time.

4.2.1.3 Measure

To encourage a high response rate, it was decided that the questionnaire should be short, easy to understand and easily accessible. The items in the measure were informed by the themes and concerns that had arisen in the novice study. These included the qualities of practitioners, identifying and managing boundaries, concepts of self, expertise and competency, training, understanding and applying psychological theory, mental health, referral and the issues that are managed in practice. In addition, the coaching behaviours highlighted in the Coaching at Work Poor Practice Report (2009) were also taken into consideration, as well as findings from previous research by Grant and Zackon (2004), Whybrow and Palmer (2006), Spence, Cavanagh and Grant (2006) and Price (2009).

The survey was designed to investigate:

- Current profession
- Experience
- Education and training
- Skills and abilities
- Identification of mental health difficulties
- Common beliefs
- Boundary identification
- Managing the boundary in practice
- Supervision
- Ethics.

In order to maximise participation and make the questionnaire accessible to professional groups, the issues were condensed into 28 items in three categories: similarities and differences; skills & knowledge; and boundaries. The survey took 10-15 minutes to complete.

4.2.1.4 Procedure

Potential participants were approached by email and asked whether they would be willing to take part in a short pilot study to evaluate a questionnaire. Participants who wished to take part in the pilot study accessed the survey by a link in the email request. The survey was hosted by Qualtrics survey platform.

4.2.1.5 Participants

A purposive sample took part in the pilot study. Participants were experienced coaches and counsellors, who had shown an interest in the subject of the research in professional organisations and network groups or had published articles relating to boundary issues.

Eighteen experienced practitioners chose to take part in the study. The sample was comprised of counsellors, coaches, coach-therapists, coaching psychologists, a cognitive behavioural therapist, a substance misuse therapist and a trauma specialist. The range of professions and skills was seen to be representative of the target population for the full study. The majority of participants (50%) had worked as a coach or counsellor for over 10 years and 65% had achieved a Masters degree or higher in their education.

All of the participants in the pilot study had a qualification in coaching or counselling, with 70% reporting that their qualification was accredited. All the coaches and counsellors stated they had experience of coaching clients and 80% had experience of counselling. Reflecting the diverse backgrounds of coaches and counsellors, the participants indicated that they had experience in counselling (70%), coaching (60%), management (60%), psychotherapy (50%), psychology (40%), education (40%), business (35%) and human resources (10%).

4.2.1.6 Results

Participants reported that the survey took approximately 15 minutes to complete. The results from the study showed a variance in perceptions on many questions. When asked about the differences between coaching and counselling, one of the participants strongly agreed that there were many differences, while 9 agreed; however, 3 disagreed and 3 strongly disagreed (see Table 5). In contrast, when asked whether there were more similarities than differences between counselling and coaching, 2 strongly agreed, 11 agreed and 6 neither agreed nor disagreed. Only one disagreed that there were more similarities than differences.

Table 5 Pilot study - Perceptions of similarities and differences

	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
Counselling addresses deep rooted personal issues	6	6	6	1	0
Coaching is mainly goal directed	2	10	5	1	1
There are more similarities than differences between counselling and coaching	2	11	6	0	0
There are many differences between coaching and counselling	1	9	3	3	3

There were also differing views on the clarity of the boundary between counselling and coaching (see Table 6). Several of the participants (6) agreed that there were clear boundaries, however 7 disagreed and 3 strongly disagreed. There was an even greater difference of opinion when stating opinions about whether the boundary between counselling and coaching is hard to identify. Whilst one of the participants strongly agreed, 7 agreed; however, 5 disagreed and one strongly disagreed.

The experienced coaches and counsellors unanimously disagreed with the statement 'Sometimes I feel unsure whether I am counselling or coaching', with ten stating they disagreed and 5 strongly disagreed. Instead, all of the

Table 6 Pilot study - Perceptions of boundaries

	Strongly Agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
There are clear boundaries between counselling and coaching	0	6	3	7	3
The boundary between counselling and coaching is hard to identify	1	7	5	5	1
I find it easy to recognise where the boundary between counselling and coaching lies	1	10	5	1	2
I believe that I manage the boundary between counselling and coaching effectively with my clients	8	11	0	0	0
Sometimes I feel unsure whether I am counselling or coaching	0	2	1	10	6
Boundary recognition is instinctive; I just feel when the dynamic has changed	2	11	2	2	2
The boundary between coaching and counselling is often negotiated with my client	2	13	2	1	1
I believe that it is difficult to consistently apply boundaries in practice	0	6	4	6	3
I think that counselling and coaching should be integrated, rather than looking for boundaries	6	2	5	4	2
As a coach , if I felt the client would benefit from counselling I would advise the client and offer to re-contract	5	4	3	2	5
As a counsellor , if I felt the client would benefit from coaching I would advise the client and offer to re-contract	4	4	4	2	4
I have learnt how to identify the boundary between counselling and coaching from experience	7	9	3	0	0

practitioners believed that they managed the boundary between counselling and coaching effectively with their clients. This was reflected in the general consensus amongst the pilot study sample in that the boundary was easy to recognise, with 10 agreeing and only one strongly disagreeing. When asked whether boundary recognition is instinctive, 13 of the 18 participants agreed that it was. The majority of experienced practitioners (15) reported that boundaries were negotiated with their client, rather than adhering to theoretical propositions.

Interestingly, there was a diverse range of opinions related to being able to consistently apply boundaries in practice. A third of participants (6)

believed that it is difficult to consistently apply the boundary, 4 neither agreed nor disagreed, 6 disagreed and 3 strongly disagreed. Variance was also apparent when asked about integrating counselling and coaching. Several (6) participants stated that they strongly agreed that counselling and coaching should be integrated rather than looking for boundaries, 2 agreed, 5 neither agreed nor disagreed, 4 disagreed and 2 strongly disagreed. The difference in opinion on using all of their coaching and counselling capabilities in practice was reflected in two further questions. When asked 'As a coach, if I felt the would benefit from counselling and I have the expertise to help, I would advise the client and offer to re-contract', 5 strongly agreed, 4 agreed, 3 neither agreed nor disagreed, 2 disagreed and 5 strongly disagreed. The results also demonstrated the many different opinions on the issue of contracting and offering coaching and counselling to one client by practitioners. A similar result was found when asked 'As a counsellor, if I felt the client would benefit from coaching and I have the expertise to help would I advise the client and offer to re-contract to provide the service', with 4 practitioners indicating that they strongly agreed, 4 agreed, 3 neither agreed nor disagreed, 2 disagreed and 4 strongly disagreed.

A large majority of the participants reported feeling confident in identifying when an issue was better suited to counselling and coaching. Eight strongly agreed, 9 agreed and only 1 neither agreed nor disagreed (see Table 7).

The majority (15) felt that they had received sufficient training to be able to identify the boundary in practice. This appeared to conflict with the response from most practitioners (16), who felt that they had learnt how to identify the boundary between counselling and coaching from experience. However, identifying the boundary based on experience may be challenging, as 16 of the experienced participants reported that they had discussed the boundary between counselling and coaching in supervision.

Table 7 Pilot study - Perceptions of skills and abilities

	Strongly agree	Agree	Neither agree nor disagree	Disagree	Strongly disagree
I feel my training has provided me with the skills to be an effective practitioner	8	10	1	0	0
My clients are aware of the ethical guidelines for counselling/coaching practice	7	4	6	1	0
I would refer my client to other professional services, if necessary, without hesitation	14	5	0	0	0
I feel I can manage most issues that my client would like to address	11	6	2	0	0
I am confident that I can identify the difference between stress and distress	9	7	2	1	0
I am confident applying psychological models and strategies in practice	14	5	0	0	0
An understanding of psychological theory underpins my practice	14	5	0	0	0
I feel that I have received sufficient training to identify the boundary between counselling and coaching	7	8	4	0	0
I feel confident in identifying mental health problems in my practice	9	8	2	0	0
I have discussed the boundary between counselling and coaching in supervision	8	8	1	2	0
I am always aware of working within my competency	11	6	2	0	0
I am confident in identifying when an issue is better suited to counselling than coaching	8	10	1	0	0

Most practitioners (17) felt that their training had provided them with the skills to be an effective practitioner. The majority of participants stated that they were always aware of working within their competency, with 11 strongly agreeing and 6 agreeing. As a result, a large majority (17) of participants felt that they were confident in identifying mental health problems.

Many (14) felt confident in identifying the difference between stress and distress and most (17) felt able to manage most issues that their client raised. All participants reported that they felt an understanding of psychological theory underpinned their practice, were confident in applying psychological models, and would refer clients to other professional services if necessary.

4.2.1.7 Discussion

Experienced coaches and counsellors who took part in the research demonstrated a range of perceptions and views in their responses. These results would appear to show that the survey adequately captures both negative and positive perceptions. As a result, it could be argued that data generated from the measure will represent a variety of opinions to reflect the views of the wider population. This outcome satisfied the feasibility criteria which focused on assessing variance in data.

Additional feasibility criteria focused on the research process and the content of the measure. Pilot study respondents confirmed that it took approximately 15 minutes to complete the survey. These details were subsequently added to the information sheet, to ensure participants in the larger study were fully informed. In feedback, several participants stated that they found the questionnaire 'thought provoking' and affirmed that they were satisfied with the range of questions and clarity of statements. One of the counsellors discussed their challenges in practice and, as a consequence, offered to take part in the concurrent qualitative study. In addition, some participants kindly made observations and suggestions for amendments.

4.2.1.8 Modifications

Each of the comments and ideas were appreciated and evaluated in light of the research objectives. One of the participants mentioned that coaches and counsellors often encountered boundaries within organisations, as well as between approaches. Whilst this is an interesting point, it was felt that including this content may detract from the focus of the study.

Another expressed their discomfort with the word counselling and explained that they felt counselling inferred 'a short-term crisis intervention done by somebody who is a bit of an amateur or even actually an amateur'. The respondent felt that the word therapy would be more robust. This point was carefully considered. As mentioned in Chapter 1, there is much confusion within counselling and psychotherapy professions as to

the distinction between the related practices (McLeod, 2009). The description offered by the coach was felt to reflect some public perceptions of counselling, however vastly underestimated the abilities of counsellors and the training they are required to undertake to achieve accreditation. As this exploratory research aims to investigate perceptions of practitioners who operate in two fields that have organically emerged from a variety of helping professions, it was felt to be more appropriate to adhere to the generic term of counselling.

One participant suggested there could be a question in the demographic section that asked all participants whether they were currently in supervision. After contemplation, it was agreed that this data would provide valuable information about the support practitioners are currently receiving. Therefore, this item was added to the questionnaire for the larger study.

Several of the participants who provided feedback stated that they would have preferred an open text box with each question to qualify their comment or their response. However, the purpose of the survey was to encourage practitioners to commit to either agreeing or disagreeing with the statements, so that consensus of applying clear, discrete boundaries could be identified. After careful consideration, it was felt that amending the survey to allow coaches and counsellors to expand on the context of decision making would detract from obtaining a definite opinion on whether boundaries could be identified or applied consistently in practice. Therefore, one open text box was included at the end of the survey. The open text question invited participants to express their views on difficulties with boundary issues. It was decided that the open text answers would be analysed using content analysis to provide additional context.

4.3 Main_study

4.3.1 Participants

Identifying the criteria to determine ‘experienced practitioner’ accurately and consistently for this study was challenging. Initially, it may seem obvious to solely consider the length of time the individual has practised as a coach. However, as mentioned in Chapter 1, coaching practitioners may take a variety of paths into coaching. As a consequence, they may have acquired skills and knowledge or personal development strategies from many areas (Grant & Zackon, 2006; Whybrow & Palmer, 2006). Additionally, experienced practitioners may be competent or demonstrate expertise in some areas, but not others. For instance, one coach may use rudimentary skills and tools while working with many clients and show little interest in developing their knowledge or self-awareness. Another may have gained a broad understanding of theoretical knowledge, but have little practical experience. Conversely, an organisational coach may regularly engage in supportive coaching relationships within their work role, but have little knowledge of coaching theories (Bachkirova & Lawton Smith, 2015).

The variability of skills and expertise of coaches made it difficult to identify specific criteria which would accommodate differences in the knowledge and skills of all counselling and coaching practitioners. Therefore, participants subjectively ascertained eligibility to take part in the experienced practitioner studies, based on their self assessment and perceived identity.

Respondents were experienced coaches, counsellors, coaching psychologists and counselling psychologists. From the initial collection of 215 surveys, 43 were excluded due to participants either having experience in inapplicable fields of practice (e.g. teacher) or incomplete data comprising of a few demographic details. The final sample of 174 was comprised of 47 (27%) males and 128 (73%) females.

4.3.2 Measures

The questionnaire utilised in the main study can be seen in Appendix I. The survey consisted of 9 demographic questions relating to gender, experience, qualifications, accreditation and supervision. To gain insight and an understanding of practitioners' perceptions of boundaries in practice, 28 forced choice items were presented, which required the participants to choose from a Likert scale to indicate agreement or disagreement. The 28 statements were grouped into three categories: (1) Similarities and differences; (2) Skills and Abilities; and (3) Boundary recognition and management. In addition, an open text question was included to enable practitioners to share experiences of managing the boundary in practice.

The open text questions were analysed using content analysis. The objective of content analysis is to condense data for qualitative analysis and also provide a broad description of the phenomena. The research endeavours to find meaning in the data and gain a sense of what is happening. The main feature of the methodology is that single words or strings of words can be condensed into codes. The approach can be used in an inductive or deductive way. If there is not a great deal of knowledge about the phenomena, an inductive approach is recommended (Lori & Kyngas, 2005). As little is known about practitioners' perceptions of the boundaries between counselling and coaching, the codes in this study were inductively developed. The codes were defined from theory and the research question. Tentative categories were deduced and reduced to main themes.

4.3.3 Procedure

To maximise accessibility to the survey, social media sites were used to recruit coaches, counsellors, coaching psychologists and counselling psychologists for the research. Requests for participants were posted on LinkedIn pages of the Special Group in Coaching Psychology, Occupational Psychology, Association of Integrated Coaches and

Therapists, British Association of Counselling and Psychotherapy Coaching Division, and International Society of Coaching Psychologists. The request posted on LinkedIn pages gave a brief overview of the study and included a link to the online survey. Data for the experienced practitioners' study were collected online using qualtrics.com as the survey platform.

The Twitter social network site was also utilised. To attract participants, requests for assistance in circulating details of the research were sent to: the Special Group in Coaching Psychology; BPS Division of Counselling Psychology; British Association of Coaching and Psychotherapy; UK Council for Psychotherapy; Association of Coaching UK; and International Coaching Federation UK. All professional bodies and member associations retweeted the request. A request was also posted on the Facebook page of Division of Counselling Psychology. In addition, a Facebook page was created to promote the study and encourage participation.

Further, requests for participants were made during the Special Group in Coaching Psychology Conference in Birmingham (2012). Delegates were invited to take part in the study, when I was presenting posters detailing findings from the mixed methods study in Chapter 3. To ensure consistency of information and consent, the research questionnaire, available from the Qualtrics survey platform, was printed onto A4 pages and distributed to potential participants. Respondents were asked to return completed surveys in sealed envelopes. The collected data were subsequently entered onto the data collection platform.

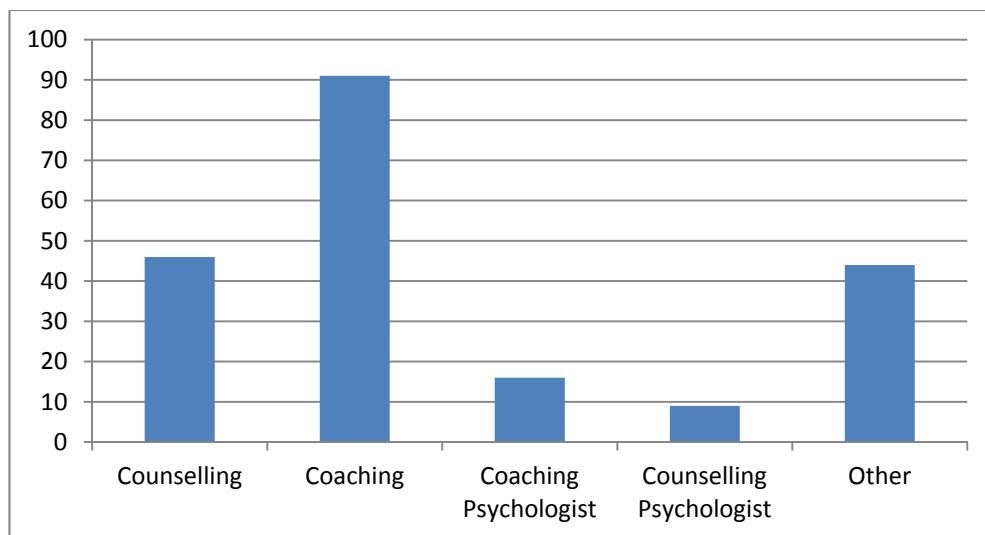
4.4 Results

The participants in the study represented a mature sample. The majority of respondents reported ages of 35 to 44 (22.9%), 45 to 54 (34.4%), 55 to 64 years (28.7%) and over 65 years of age (4.5%). There were no participants under the age of 25 years old and only 8% under the age of 35. Two participants declined to give their age.

4.4.1 Practitioners' Professions

To gain an understanding of the diversity of professions that may encounter the boundary in counselling and coaching practice, practitioners were asked to indicate their current profession. The data show that the sample was comprised of professional coaches, coaching psychologists, counselling psychologists, professional counsellors, therapist-coaches and coach-therapists.

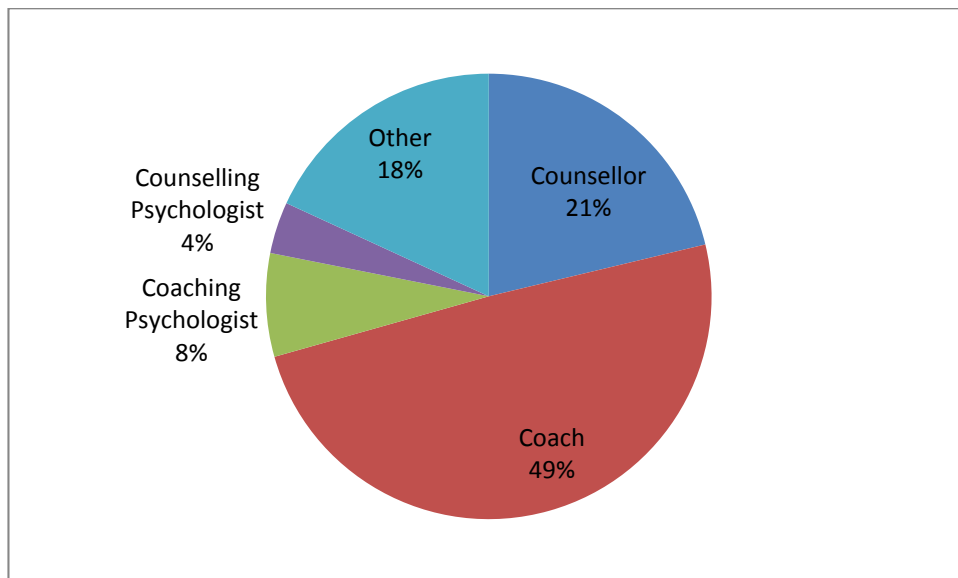
Figure 8 Professions of Experienced Practitioners



The majority of participants were coaches (52%) and counsellors (26%), with a small number of coaching psychologists (9%) and counselling psychologists (5%). Additionally, in the 'other' category, participants described themselves as therapist-coaches, coach-therapists or psychological coaches to indicate that they used both helping approaches in practice (details of additional named occupations can be seen in Appendix K).

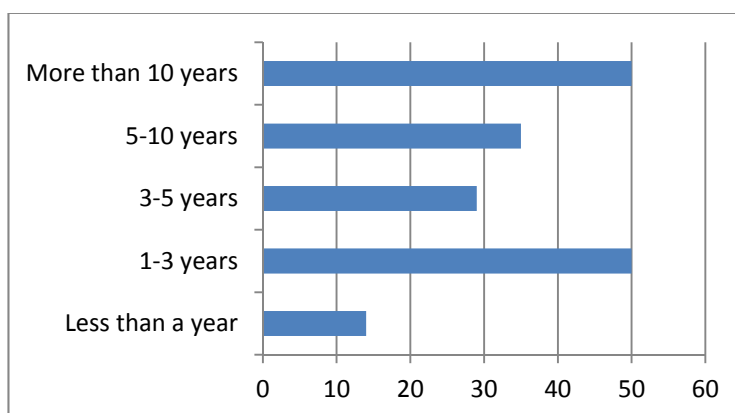
Working with more than one approach in practice may influence how boundaries are identified and managed. A substantial number of respondents indicated that they focused solely on one helping approach (see Figure 9). However, nearly one fifth (18%) worked with a combination of professional approaches.

Figure 9 Percentages of Participants Indicating One Approach in Professional Practice



To understand the depth of practitioners' experience, respondents were asked to indicate how long they had been working as a coach or counsellor. As seen in Figure 10, many of the participants (49%) had over 5 years' experience, with 46% reporting they had been practising between one and five years.

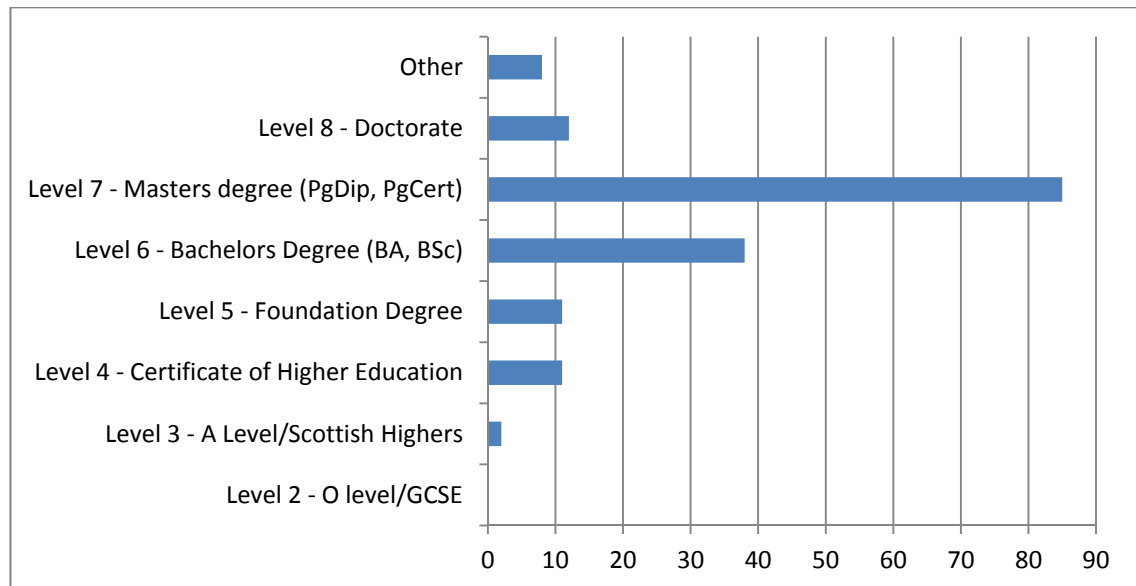
Figure 10 Coaching and Counselling Experience



4.4.2 Education and Training

The substantial majority of participants were university educated (92%), with many achieving a postgraduate degree or diploma (56%) (see Figure 11 below).

Figure 11 Experienced Practitioners' Education Level

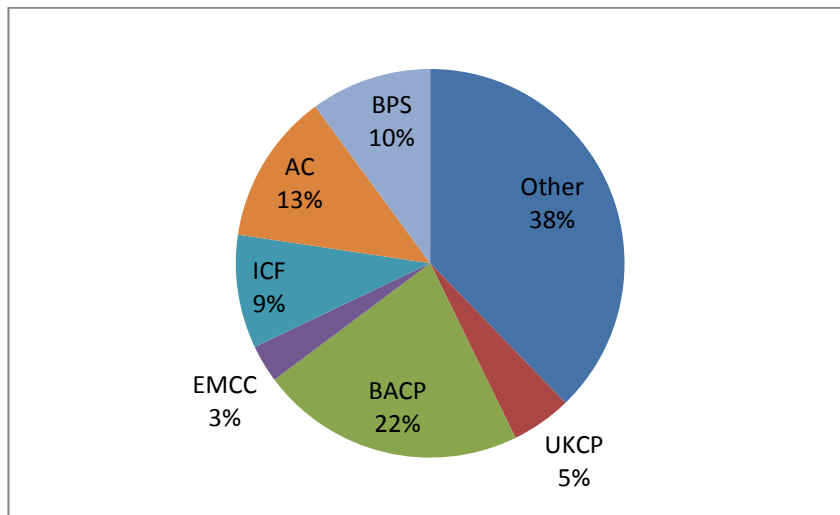


In addition to academic qualifications, practitioners were asked to indicate whether they had received any coaching or counselling training. The majority (58%) reported attaining a coaching qualification and many (47%) had achieved a qualification in counselling.

To demonstrate the rigour and credibility of training, participants were asked whether their qualifications were accredited by professional bodies. Participants confirmed their qualifications were accredited by British Association of Coaching and Psychotherapy (22%), Association of Coaching (12%), British Psychological Society (10%), International Coaching Federation (9%), UK Council for Psychotherapy (5%), and European Mentoring and Coaching Council (3%) (see Figure 14). In addition, 38% reported qualifications from other organisations such as Institute of Leadership and Management, Counselling and Psychotherapy

Central Awarding Body, and NCFE (details of all organisations can be found in Appendix J).

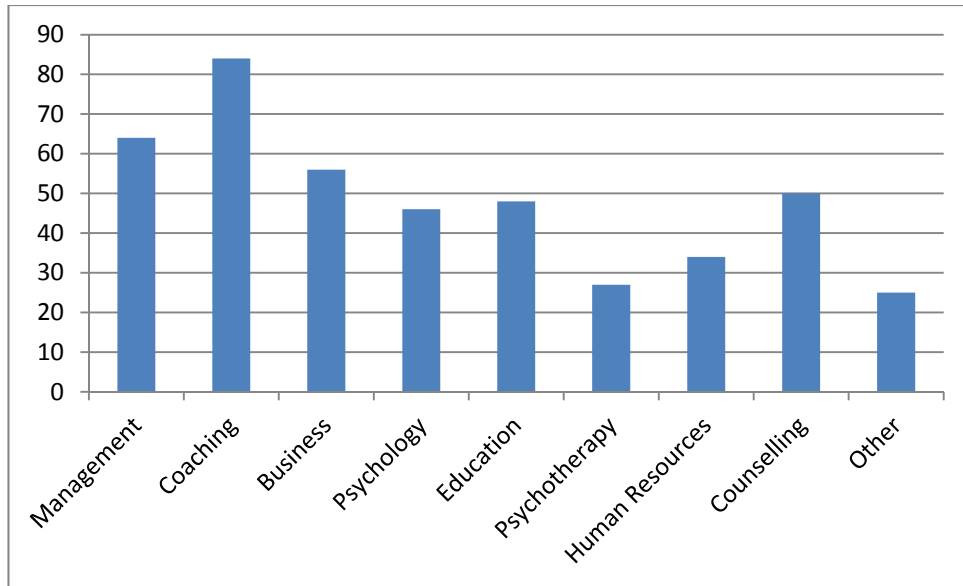
Figure 12 Accreditation Bodies of Experienced Practitioners' Qualifications



4.4.3 Prior Experience

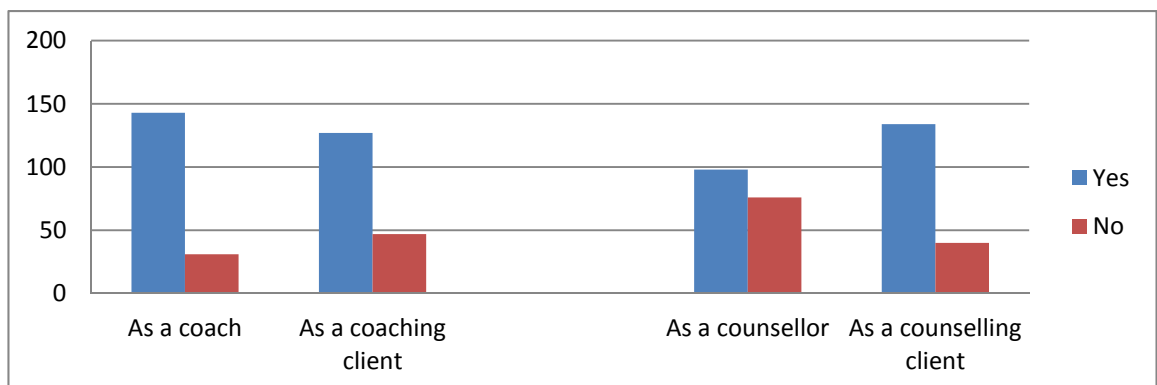
Coaches and counsellors tend to augment their academic and professional qualifications with knowledge gained from a wide variety of professional backgrounds. As mentioned in Chapter 2, counsellors have traditionally come from teaching or social welfare backgrounds, whereas coaches are generally perceived to come from sports, business, management and human resources. As can be seen in Figure 15, coaches and counsellors indicated that they had a wide range of previous experience. Many identified coaching (47%) and counselling (29%) as their professional background. Respondents also reported they had gained experience working in management (36%), business (31%), education (29%), psychology (27%), human resources (19%) and psychotherapy (15%). Additionally, participants indicated prior experience in the fields of consultancy, training, research, nursing, and social work (see Appendix Q).

Figure 13 Experienced Practitioners' Professional Backgrounds



To gain an appreciation of practitioners' experiential understanding of coaching and counselling, respondents were asked to indicate their experiences as both practitioner and clients. The vast majority of practitioners (82%) reported coaching clients, with a further 73% indicating they had been a coachee or coaching client. Many practitioners also reported experience of counselling clients (56%), with 77% of participants reporting they had received counselling as a client (see Figure 16).

Figure 14 Practitioners' Experience of Coaching and Counselling

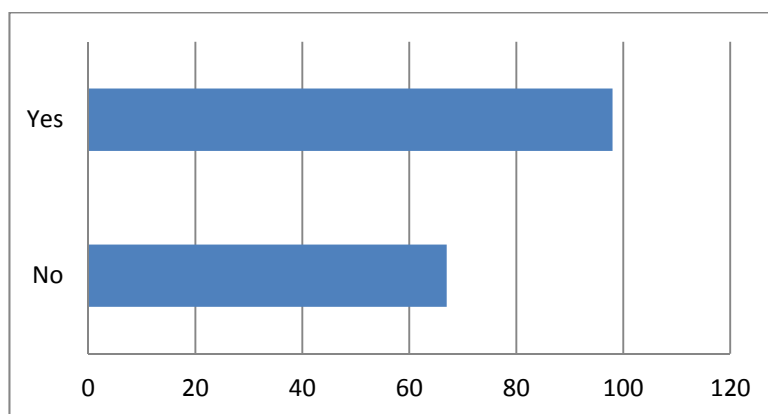


4.4.4 Supervision

Following training and accreditation, counselling professional bodies require practitioners to receive regular supervision to provide professional

support and maintain ethical practice. At the current time, engaging in supervision is a recommendation, but not a requirement, in coaching. These differing positions in respect of support and personal development are reflected in the data. Figure 17 illustrates that, whilst 59.3% of coaches and counsellors reported they are currently in supervision, 40.6% were not in supervision.

Figure 15 Experienced Coaches and Counsellors in Supervision

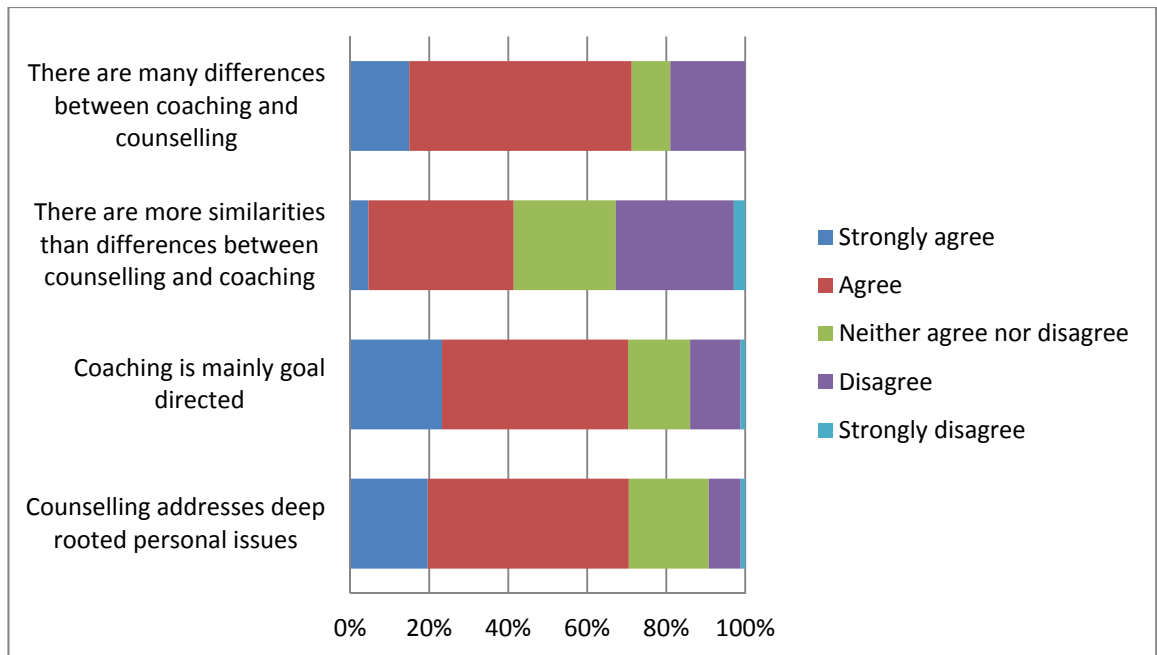


4.4.5 Similarities and Differences

The majority (71.2%) of participants agreed that there were many differences between coaching and counselling, although some (18.9%) disagreed. When participants were asked whether there were more similarities than differences between counselling and coaching, 41.2% agreed that there were more similarities; however, 25.8% neither agreed nor disagreed and 29.8% disagreed that there were more similarities than differences.

The majority (70.2%) of coaches and counsellors agreed that coaching is mainly goal directed. A similar level of agreement was evident in practitioners' beliefs about the purpose of counselling, with 70.4% of coaches and counsellors agreeing that counselling addresses deep-rooted personal issues.

Figure 16 Experienced Practitioners' Views of Similarities and Differences



4.4.6 Skills and Abilities

4.4.6.1 Training

When considering whether the training they had received provided them with enough information or knowledge to be able to identify the boundary in practice, 62.5% of coaches and counsellors agreed that their training had been sufficient, 21.2% neither agreed nor disagreed, and 16% disagreed that their training had helped them identify boundaries in practice.

When questioned on whether an understanding of psychological theories underpinned their practice, 82% of practitioners agreed that psychological theory was a core part of practice. Further, 73% of practitioners felt that they were confident in applying psychological models and strategies. However, 11% of the experienced practitioners who took part in the study noted that they did not feel confident, and 15.6% neither agreed nor disagreed.

Unsurprisingly, 90% of coaches and counsellors who took part in the study felt that their training had provided them with the skills to be an effective

practitioner, while only 4.6% disagreed that their training had been sufficient.

4.4.6.2 Competence

A large proportion (85%) of the participants felt that they would be confident in identifying when an issue was better suited to counselling rather than coaching. Only 3% of participants felt they would not be confident in identifying when an issue had possibly crossed over the line.

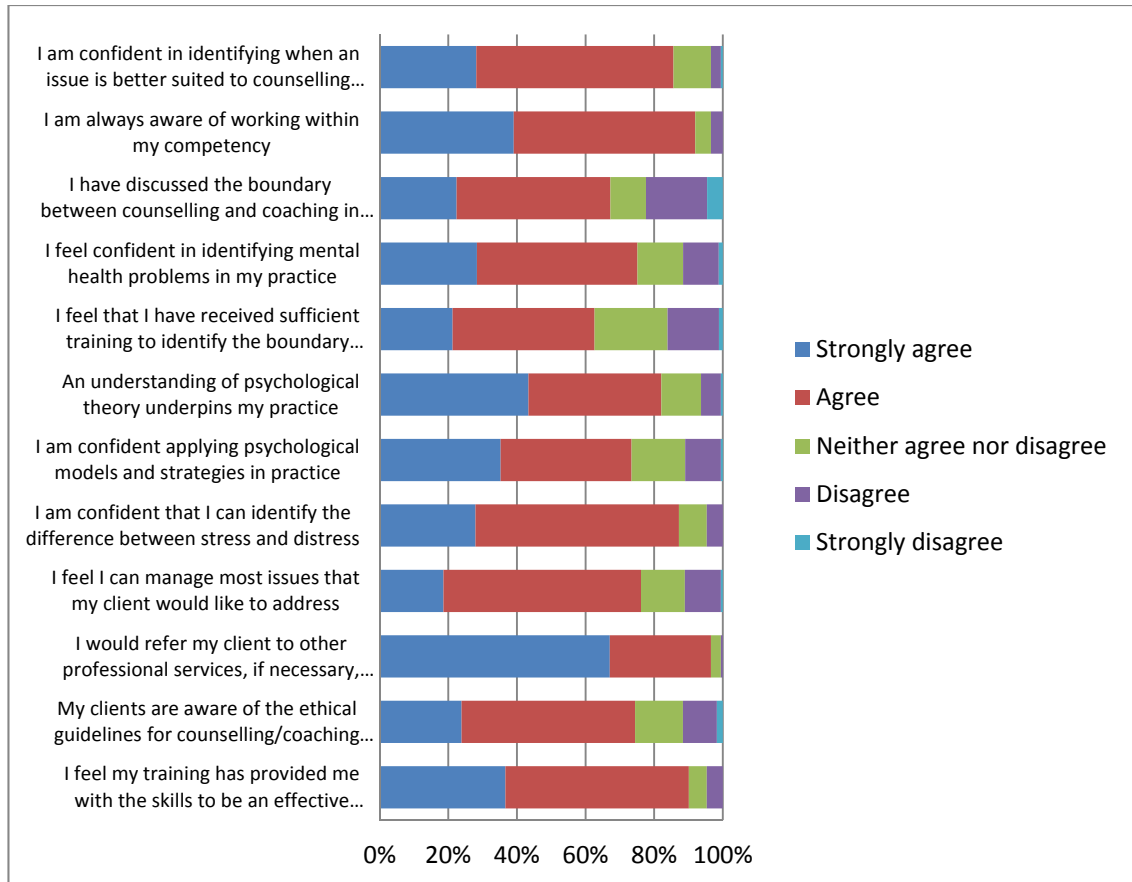
The experienced practitioners who took part in the study also expressed confidence in working within their competency. The vast majority (91.8%) said that they were aware of working within their competency.

Interestingly, as the participants included both counsellors and coaches, 76.1% of participants felt they could manage most issues that the client would want to address.

4.4.6.3 Mental health

Considering there were a high proportion of coaches within the participant sample, it was curious to note that 87.2% of participants felt they were confident in being able to identify the difference between stress and distress. The most experienced coaches and counsellors (74.6%) felt confident in identifying mental health problems in practice. This is in spite of the fact that most coaches would not have had specific mental health training, or have had an opportunity to develop assessment skills for psychological difficulties.

Figure 17 Practitioners' Skills and Abilities



4.4.6.4 Ethics and Supervision

Ethical practice was important to many of the experienced practitioners who took part in this research. The majority (73%) agreed that their clients were aware of ethical guidelines for counselling and coaching in practice. This indicates that practitioners may discuss ethical considerations when contracting with clients.

Supervision allows coaching practitioners to discuss their work and consider ethical issues which may have arisen in practice. The challenges of managing boundaries in practice were reflected in the responses of over half of the practitioners (57.2%), who indicated that they had discussed the boundary between counselling and coaching in supervision.

4.4.7 Boundaries

4.4.7.1 Identifying the boundary

There appeared to be some confusion and disparity in experienced practitioners' views when identifying the boundary between counselling and coaching in practice. When asked whether there were clear boundaries between counselling and coaching, 60.2% agreed that there were clear boundaries, however nearly a third (31.5%) felt that there were not clear boundaries. Further, there appeared to be more confusion when asked whether the boundary between counselling and coaching was hard to identify, with 42.9% of coaches and counsellors agreeing that it was hard to identify and 43.5% of practitioners indicating the boundary was not hard to identify. These findings were reinforced when practitioners were asked whether they found it easy to recognise where the boundary lies between counselling and coaching. Whilst over half (57.4%) agreed that they did find it easy to recognise, 20.6% disagreed and a further 21.8% neither agreed nor disagreed. This would appear to show that a fifth of experienced practitioners do not find it easy to recognise the boundaries between coaching and counselling.

The majority of practitioners who took part in the survey (71%) felt that they had learnt to identify the boundary from experience. Indeed, many practitioners (59.7%) reported that boundary recognition was intuitive and that they could *feel* when the boundary had changed. A further 46.8% of coaches and counsellors indicated that they negotiated the boundary with their clients.

4.4.7.2 Boundary management

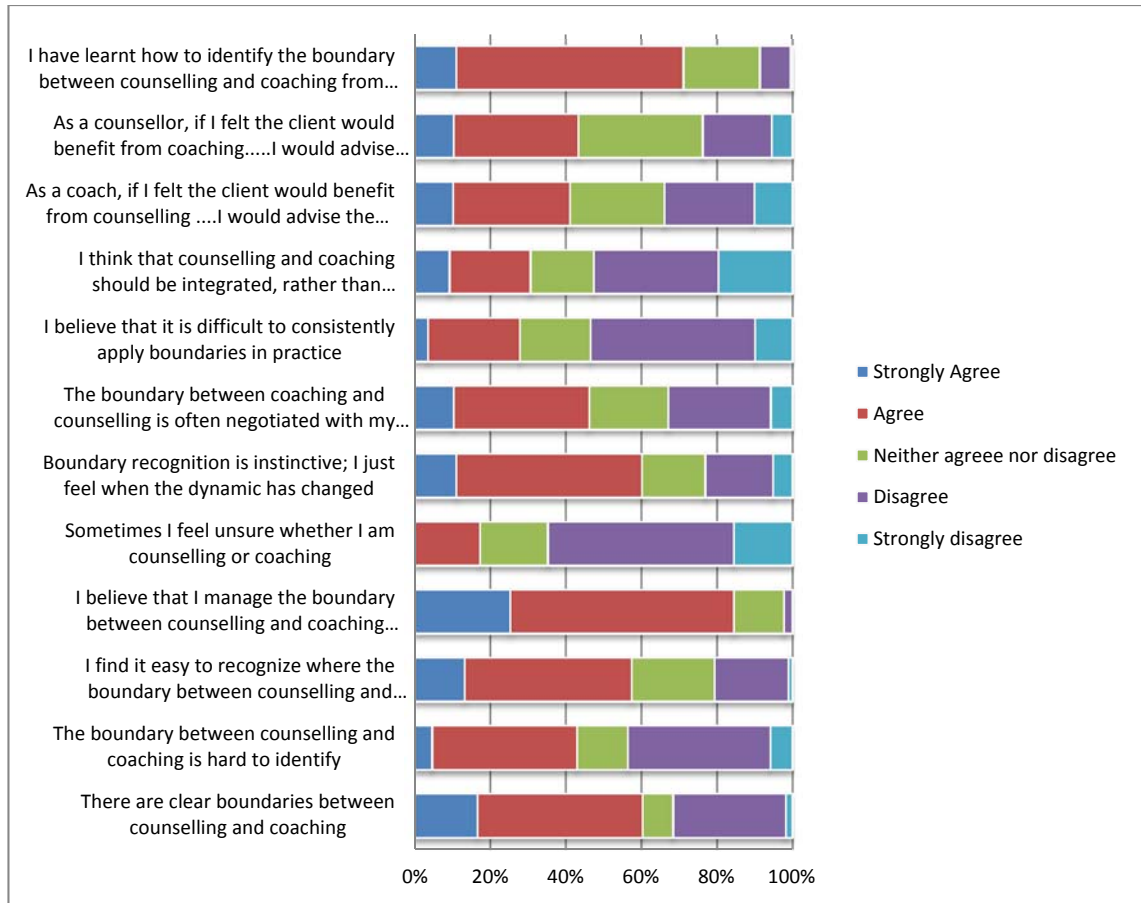
This confidence was reflected by 84% of experienced practitioners who reported that they manage the boundary effectively with their clients. In comparison, 64.3% of experienced practitioners felt sure about which counselling or coaching approach they adopted with their clients; however, this would appear to indicate that 35% of experienced practitioners were not sure which approach they were using with clients in practice. In

addition, whilst over half of respondents (53.4%) indicated that it was possible to consistently apply boundaries, more than a quarter (27.8%) of experienced practitioners felt that it was difficult to consistently apply boundaries.

4.4.7.3 Contracting and Integration

Counsellors and coaches reported mixed views on the integration of helping approaches. Whilst many (53%) disagreed with integrating coaching and counselling, 30.5% of respondents felt that the approaches should be integrated, with a further 16.7% of experienced practitioners undecided. Contracting and re-contracting may be used as a means of integration and separation. When asked 'as a coach, if they felt the client would benefit from counselling, and they had the expertise to help, they would advise the client and offer to re-contract'; 41% agreed that they would offer an alternative helping approach, while 25% neither agreed nor disagreed and 34% disagreed. Similarly, when asked 'as a counsellor if they felt the client would benefit from coaching, and they had the expertise, they would advise the client and offer to re-contract', 42% agreed that they would offer to coach the client. However, a higher percentage (32.9%) neither agreed nor disagreed, while less overall disagreed (23.6%).

Figure 18 Practitioners' Perceptions of Boundaries



4.4.8 Content analysis

At the end of the survey, coaches and counsellors were asked whether they had experienced any problems with identifying or managing the boundary between counselling and coaching. Practitioners were invited to comment or expand on their experience. The qualitative data gathered were analysed using content analysis. From the text comments, themes of 'No Problems', 'Experienced difficulty', 'Overlap', 'Concerns' and 'Support' were identified. The total responses for each theme are illustrated in the table below (see Table 5).

Table 8 Themes Identified from Content Analysis

Identified Theme	Total responses
No Problems	66
Experienced difficulty	31
Overlap	11
Concerns	26
Support	9

4.4.8.1 No problems

The *No problems* theme reflects the experiences of practitioners who felt that boundaries were clear and managed effectively in practice. Within this theme there were five principal categories: No explanation; Clear boundaries; Contracting; Informed by experience; Informed by training; and Identification of psychological issues.

Table 9 Category Codes for the No Problems Theme

Categories	Code	Total
No (No explanation)	N1	20
No (Clear boundaries)	N2	12
No (Contracting)	N3	7
No (Experience)	N4	16
No (Training)	N5	9
No (Mental Health)	N6	2

As can be seen in Table 9, practitioners mainly felt that there were clear boundaries and that experience had informed their recognition of boundaries in practice. Many practitioners simply entered 'no', indicating that they had no difficulties recognising or working with boundaries.

Several practitioners (12) stated that their boundaries were agreed with clients before commencing practice.

N2: "No. I offer coaching not counselling and I make that clear from the outset so that I do not get into a counselling situation."

Indeed, boundaries were often negotiated or stipulated as part of the contract. One participant highlighted that the contract was then used to maintain boundaries.

N3: "Clients need to be reminded of our coaching contract once in a while and generally have no issue getting back into form."

Experienced practitioners' confidence in their experience, abilities and skills also offered them reassurance and clarity when working with clients.

N4: "No - although I think the boundary is one of competence. If one feels competent at dealing with a direction, then perhaps this defines where the boundary lies."

Practitioners also referred to awareness of their own personal boundaries and training.

N4: "At all times, I am aware of my own personal limits and would not go beyond my area of expertise."

N5: "I have had some counselling training and have worked in acute mental health, so am a bit more comfortable about recognising mental health issues."

Two practitioners referred to their ability to identify and manage mental health concerns in practice.

N6: "Recently I was coaching [a client] who admitted to being suicidal, I advised her to seek help from a counselling service, which she did..."

4.4.8.2 Experienced difficulty

The *experienced difficulty* theme reflects the observations of practitioners who had encountered difficulties managing the boundary between coaching and counselling in practice. This theme was comprised of categories related to: personal experience; professional judgements; mental health of the client; insufficient knowledge; breadth of (counselling) approach; and contractual obligations (see Table 10). Managing clients' mental health issues in practice was seen to be the most challenging aspect of working with boundaries for some practitioners (18).

Table 10 Category Codes for the Experienced Difficulty Theme

Categories	Code	Total
Yes (Personal Experience)	Y1	7
Yes (Professional)	Y2	4
Yes (Mental Health)	Y3	18
Yes (Lack of Training)	Y4	1
Yes (Contractual Obligations)	Y5	1

Several practitioners (7) acknowledged that they had had difficulties working with the boundary between coaching and counselling in practice.

Y1: "Have I experienced problems managing boundaries between psychotherapy and coaching in practice? Yes."

Some (4) indicated that they experienced difficulties due to misunderstandings from other professionals.

Y2: "Only... from other professionals who don't understand what coaching is and where the boundaries lie."

The majority of practitioners (18) who shared their experiences of difficulties indicated that problems were related to mental health concerns.

Y3: “With clients who present evidence of things like bipolar and manic depression, it can be especially challenging to maintain a productive coaching relationship.”

In addition, practitioners referred to insufficient knowledge or accountability to a third party.

Y4: “I felt out of my depth and suggested that I recommend him to a coach with a counselling background.”

Y5: “This presented other areas for concern as the organisation had expectations on the 'coaching' and did not fund counselling. Also matters of confidentiality and his current mental health, job role, systems influence etc.”

4.4.8.3 Overlap

The *overlap* theme refers to practitioners' perceptions of the crossover between coaching and counselling. The theme incorporates categories of commonalities and blending approaches.

Table 11 Category Codes for the Overlap Theme

Categories	Code	Total
Overlap (No Clear Boundary)	O1	11

Several practitioners explained that, rather than believing the boundary presented difficulties, they felt the two approaches overlapped and merged.

O1: “I see coaching and counselling as being a Venn diagramme - some unique aspects, but a large area of overlap. For that reason, I

don't concern myself with boundaries in the way that a traditional coach or a traditional counsellor might.”

O1: “I believe there is considerable overlap between some counselling and coaching approaches and greater differences in others.”

4.4.8.4 Concerns

The *concerns* theme comprised of aspects that practitioners felt were particularly pertinent when effectively managing boundaries in practice. Rather than relating to affective personal experience, the aspects described tended to focus on observations and external factors. These included: public perceptions of coaching and counselling; lack of appropriate training; competence; and ethics (see Table 12 below).

Table 12 Category Codes for the Concerns Theme

Categories	Code	Total
Concern (Lack of Training)	C1	6
Concern (Competence)	C2	2
Concern (Ethics)	C3	3
Concern (Public Perceptions)	C4	15

Several practitioners (6) noted that a lack of training (in others) represented a significant concern in regard to managing boundaries with clients.

C1: “ I self-enrolled on counselling training so I could fully understand the differences and boundaries. I feel that other leaders in my organisation who have not done this are 'flying blind' to some degree (and I have experienced the consequences).”

Additionally, two noted their concerns about self-awareness and competence after completing training.

C2: "My main concern is that coaches deal with issues way, way beyond their abilities. Having been on their training course, they pay no heed to self-reflection or humility."

Some (3) were concerned that clients were informed about ethics and ethical guidelines.

C3: "I don't think that clients understand the difference or the different ethics."

C4: "I don't have an issue with the boundaries but clients often have a different perception of this. A lot of my time is taken with clients believing they want coaching, but needing counselling."

However, most concerns centred on public perceptions of mental illness and counselling and how these views may influence the service that clients sought.

C4: "I believe that counselling is viewed by many managers with embarrassment and would be reluctant to say that they see a counsellor, but it would be OK to say they see a coach."

C4: "Not really, the only problem is that the coachee may not want to be referred to a counsellor/someone else and may then feel somewhat rejected."

4.4.8.5 Support

The support theme reflects the channels of support practitioners used when boundary issues arise. This theme was comprised of supervision and other professional categories (see Table 13).

Table 13 Category Codes for the Support Theme

Categories	Code	Total
Support (Supervision)	S1	5
Support (Professional)	S2	4

Several (5) practitioners indicated that any difficulties or challenges that they experienced, when contemplating boundaries in practice, were discussed in supervision.

S1: "I coach 'at the deep end', and receive supervision from a psychotherapeutically qualified supervisor to support me in navigating the boundary."

Alternatively, other practitioners (4) stated that they discussed their dilemmas with fellow professionals or peers.

S2: "None to date, but would seek fellow professionals' advice and input."

4.5 Discussion

In contrast to previous studies, which have focused on segments of the coaching industry, this study has endeavoured to provide an inclusive appreciation of coaching and counselling practitioners' perceptions of boundary issues. Investigating the different practitioner perspectives is likely to enhance understanding of where the boundaries lie and difficulties in adhering to proposed boundaries when working with clients.

Within this study, coaches and counsellors self-identified their professional expertise and experience. The self refers to the way people see themselves in parallel to others. The construct is made up of a person's beliefs, assumptions, evaluations, cognitions and perceptions about themselves (Swann & Bosson, 2010). Festinger (1954) proposed that

people develop their self-knowledge by comparing their ideas, values and beliefs with others. The comparison can either be an upward comparison, comparing abilities or skills with an expert, or downward comparison, comparing opinions and traits with people that are perceived to have less. Indeed, the concept of self is closely aligned to theories of impression management (Jones, 1964). Individuals may seek to present themselves in a way that they want others to perceive them and can place great importance on belonging to a particular professional group (Swann & Bosson, 2010). Additionally, identities help people construct meanings and make decisions. An individual's identity may be combined to form a self-concept. The self-concept encompasses all of the aspects that a person believes are true of their self (Niesser, 1993; Baumeister, 1998). Their identity therefore directs them towards choices that are consistent to their self concept (Oysterman, Elmore & Smith, 2012).

4.5.1 Experience

The age range participants in the study (from 25 to 81 years of age) showed that coaches and counsellors are able to call on experience to help inform their judgements. The majority of people who took part in this study were coaches (56%). Of these coaches, 75 (43%) indicated that they only worked within coaching. The reason for the prevalence of coaches within the survey may be due to an impetus in the emerging industry to demonstrate discrete areas of practice and show that coaching provides a service that is not addressed by another profession.

The boundaries between helping approaches are also a concern within counselling. Over a quarter of the participants reported working as a counsellor and, of these counsellors, 19% indicated that they work solely in the counselling field. This would appear to demonstrate that a proportion of coaches and counsellors work in more than one discipline and are, therefore, experiencing the challenges of managing and identifying boundaries in practice.

Indeed, several participants indicated that they were either a therapist-coach or a coach-therapist. The terms coach-therapist and therapist-coach would appear to indicate that, rather than adopting a single approach with their clients, some practitioners are combining helping approaches with the same client and creating their own model of practice.

4.5.2 Education

The standard of education of coaches and counsellors reported by practitioners was very high. The majority of respondents reported achieving a Masters level of education (85%). Participants also reported a wide range of occupational backgrounds which could potentially enhance practice by providing additional context, interpersonal skills or knowledge. Therefore, it could be suggested that experienced counsellors incorporate tacit knowing in their everyday practice. The tacit knowledge may integrate information or skills from many disciplines. The learning may have come from exploring, thinking, mimicking others and trial and error (Jarvis, 2012). This diverse body of knowledge can then be used to inform practice (Cross & Watts, 2002).

As well as drawing on tacit knowledge and formal education to inform their practice, many who took part in the study (58%) reported attaining a coaching qualification. Further, nearly half of participants (47%) reported holding counselling qualifications. As only 26% of the sample indicated working as a counsellor at the current time, this would appear to demonstrate that counsellors might have broadened their approach to include coaching, or transitioned to work as coaches as their primary profession. Additionally, the majority of the coaches and counsellors (70%) reported that their professional qualification was accredited by a professional membership body.

The majority of practitioners (82%) reported that psychological knowledge informed their practice and many (73%) felt confident in applying models and strategies. However, without consistent training standards it is difficult to evaluate how much this is based on personal perception or educational

standards. Newly trained coaches (see Chapter 3) indicated that, whilst they had been introduced to psychological models and methodologies, they did not have a deep theoretical understanding of the frameworks or tools that they used in practice.

4.5.3 Similarities and differences

Experience did not appear to have allayed any of the confusion related to similarities and difference between helping approaches, demonstrated by novice and newly trained coaches in Study 1. Experienced coaches and counsellors also showed many inconsistencies when considering the similarities and differences between coaching and counselling. However, in contrast to new coaches' focus on similarities, experienced coaches reported that they believed there were numerous differences between the approaches (70.4%). However, nearly half of the practitioners surveyed felt there were more similarities than differences (41.2%) between the approaches. Indeed, consideration of the similarities and differences between coaching and counselling elicited some degree of confusion in experienced practitioners. Nearly a third of practitioners (29.8%) neither agreed nor disagreed, which may suggest that similarities could be contextual rather than consistent.

Experienced practitioners were also asked for their views of commonly suggested purposes or direction of coaching and counselling. Spence, Cavanagh and Grant (2006) suggest that the aim of counselling is to help people address their deep personal problems. The results from this survey would suggest that the majority of experienced participants (70.4%) agree with this differentiation. A similar majority of coaches and counsellors (70.2%) also agreed that coaching is mainly goal focused. Whilst it can be seen that these descriptions of practice are widely held, it is important to acknowledge that 30% of participants do not perceive the approaches as focused on these issues. This may reflect experienced practitioners' wider understanding of the diversity of coaching and counselling approaches. For instance, brief solution focused therapy and developmental coaching

would not fit into the narrow suggested definitions for counselling and coaching in the survey.

Being able to work effectively is about having the appropriate skills and abilities (Jarvis, 2006). Within the helping approaches, knowledge of methodologies, frameworks and skills are integral to attaining competence (Kruger & Dunning, 1999). An overwhelming majority of experienced practitioners in the study (90%) felt that their training had provided them with appropriate skills to be effective in practice. In addition, a significant number (62.5%) also reported that their training had been sufficient to help them identify the boundary between coaching and counselling in practice. However, as approximately half of participants had gained qualifications in coaching and counselling, this figure represents an interesting anomaly. Without specific training or appreciation of the nuances of the different approaches, it is difficult to understand how alternative professional training would afford the necessary knowledge to form boundary judgements.

It could, therefore, be argued that lack of appropriate knowledge implies an impaired capacity to make decisions competently and an inability to distinguish their true competence (Kruger & Dunning, 1999). Research has shown that a person's self perceptions may not be the most accurate means of assessing their own competence. Indeed, their flawed self-evaluation often promotes positive self image, rather than reflecting reality. As a consequence, people may be overconfident in their beliefs of skills and capabilities, relying on biased self judgements to inform their view (Carter & Dunning, 2008). Choices and decisions are frequently guided by the true self and self regulation (Schlegel et al., 2012). However, self knowledge is far from perfect (Vazire & Mehl, 2008). Individuals often have mistaken perceptions of their personal motives and how they behave (Bollich, Johannet & Vazire, 2011). Indeed, it could be said that one of the primary motivations of self knowledge is to be regarded as 'good' and respected by others. This may lead to individuals emphasising positive

aspects of their behaviour so that others feel good about them and thereby earn respect. Respect is founded on belief, incompetence and virtue. Therefore, a person must be seen to be able to perform their role well and also demonstrate trustworthiness and awareness of ethical behaviour (Baumeister, 2011). Self judgements affect an individual's self esteem and self efficacy. As a consequence, self judgements have an effect on self worth and feelings of competence (Crocker & Park, 2012).

4.5.4 Abilities

The discrepancy between belief in abilities and reported professional training was further highlighted with participants reporting of confidence in working with issues in practice. Considering 47% of participants had achieved a qualification in counselling, and previous research (Price, 2009; Maxwell, 2009) has indicated that mental health difficulties arise in coaching practice, it was surprising to see that 76.1% of participants felt that they would be able to manage most things that their clients would like to address. A significant number (85%) of experienced participants also indicated that they would feel confident identifying when issues were better suited to counselling or coaching, with 87.2% of experienced coaches and counsellors claiming they would be able to identify the difference between stress and distress, while a further 74.6% indicated that they would be able to identify mental health problems in practice. Similarly, a high majority (91.8%) felt that they worked within their competencies. The level of reported confidence is difficult to rationalise in comparison to the reported experienced practitioners' training.

Overconfidence in making decisions indicates that people are more overly optimistic when faced with difficult situations which they don't have the knowledge or abilities to manage effectively (Kruger & Dunning, 1999). When people overestimate their abilities, they often believe their decisions and behaviour demonstrate competence. Paradoxically, the skills and knowledge that are needed to show competence are the same skills needed to evaluate competence. In effect, meta-comprehension is

necessary to make an accurate judgement of performance (Kruger & Dunning, 1999). Overconfidence in capabilities can also bring about risk-taking behaviours (Dunning, 2006). Not only could practitioners make decisions that would be potentially dangerous to clients, but the incompetence denies them the ability to recognise their errors (Kruger & Dunning, 1999).

Whilst some may feel that they have identified the correct solution or have the skills to help, a lack of knowledge may lead them to be unaware of a solution that may be more effective. These potential errors of omission colour how a person perceives their own capabilities and competence (Carter & Dunning, 2008). The problem of confidence in competence is further exacerbated by ill-defined problems or issues. When there is not a clearly defined method for achieving outcomes, it becomes more difficult to define whether the strategies used were the most effective or correct. When excellence in a task can be defined in many ways, people find it difficult to determine their own level of achievement. As a result, they may evaluate their performance as unrealistically positive (Carter & Dunning, 2008).

4.5.5 Boundaries

When identifying the boundary, rather than adhere to prescribed suggested definitions of where the boundaries are between counselling and coaching, many experienced practitioners claim to be able to sense when the dynamic in the relationship has changed. Indeed, 59.7% of experienced practitioners agreed that boundary recognition is instinctive and that they feel when there is a change in the direction of the work with the client. 16.6% neither agreed nor disagreed, however 22.9% disagreed that they felt when the dynamic has changed. This would indicate that 39.5% are likely to feel more confident in self identifying boundaries. Indeed, 46.8% of the participants in the study said that they often negotiated the boundary with their clients. This would seem to suggest

that practitioners view areas of practice as malleable and defined by contracting, rather than defined by suggested theoretical boundaries.

The results from the survey also highlighted considerable confusion and inconsistency in boundary recognition amongst experienced practitioners. For example, whilst many practitioners felt that there are clear boundaries between counselling and coaching (61%), which are easy to recognise (57%), many also reported finding the boundary hard to identify (44%). It could be suggested that, whilst many believed there was a definite difference between the approaches, there was difficulty defining the boundary. Indeed, Price (2009) suggests the boundary may be a convenient device used to separate a dynamic helping approach from a more established counselling domain.

Alternatively, when considering that many experienced practitioners reported self identifying the boundaries or negotiated boundaries with clients, it could be argued that practitioners demonstrate pluralistic ignorance in acknowledging boundaries (Thaler & Sunstein, 2008). Many may believe that suggested boundaries do not exist in practice, but believe that others within their professional or social group accept the boundaries as providing parameters to the discipline. As a consequence, the practitioners may self identify boundaries, according to their capabilities and beliefs, or appear to support the concept.

4.5.6 Integration

Integration of approaches was one of the more illuminating findings from the research. Although much literature would appear to promote the divergence of the professions and suggest that there should be clear delineation between coaching and counselling, it would appear that many experienced practitioners may prefer to merge the two approaches to best meet the needs of their clients. In the survey, 30.5% of the coaches and counsellors felt that counselling and coaching should be integrated rather than looking for boundaries. Additionally, 16.7% neither agreed nor disagreed. These results strongly suggest that practitioners viewed

boundaries as malleable and were willing to work across disciplines in practice. However, over half (53%) disagreed and felt that counselling and coaching should not be integrated. This would appear to suggest that these practitioners would prefer to have separate professions with clearly defined skills and knowledge bases to help their clients.

When considering working with the same client between coaching and counselling, it has been suggested that if the practitioner has the abilities and skills they may wish to provide those services to the client rather than refer them to alternative professional services. Participants in the survey were asked to indicate whether they would be willing to re-contract with clients if they possessed the necessary skills to help them. When working as a coach, 41% of participants felt that they would be willing to offer to re-contract and provide counselling services. Similarly, when working as a counsellor and feeling that the client would benefit from coaching, 42% felt they would be willing to re-contract and continue working with the client.

Initially, these figures would appear to suggest that nearly half of the experienced practitioners surveyed would be willing to work in both modalities with their clients. However, as there is a clear split in the professions of the participants, and many coaches did not have counselling experience, the findings may reflect the hypothetical decisions, rather than judgements based on practice.

4.5.7 Supervision

Identifying and managing boundaries may prove challenging for experienced practitioners. Many coaches and counsellors may operate in isolation and need additional support when confronted with dilemmas and perplexing situations (Whybrow & Palmer, 2006). Counsellors engage in learning programmes to enhance their professional development and enrich their practice. They are also supported in practice with regular clinical supervision, which encourages counsellors to reflect on their practice and share any difficulties or challenges with clients.

Coaches, on the other hand, do not have any professional or regulatory obligation to engage in supervision. This may be reflected in the finding that only 59.3% of participants reported currently receiving supervision. Supervision encourages reflective practice to gain self awareness and insight. Self awareness is commonly identified as a person's awareness of their thoughts, emotions, assumptions and intuitions. Self awareness is embedded in both personal and professional development (Donati & Watts, 2005).

Personal development and transformation are continual throughout a person's life history. In professional interactions, each situation a practitioner encounters is unique. Whilst the practitioner may experience similar circumstances, the conditions will never be repeated in exactly the same way. As a consequence, practitioners may learn to adjust their practice according to the needs of the client. These adaptations may be intuitive and preconscious. Important contextual information may be concealed and, as a result, meanings interpreted from the situation may not be correct (Carter & Dunning, 2008; Jarvis, 2012).

Experienced practitioners could be encouraged to explore ethical dilemmas in continuous professional development to enhance their practice. Further, it would be beneficial to engage in supervision ways to augment ethical awareness (Passmore & Duffy, 2010). Supervision provides feedback to help practitioners reflect on their practice and gain insight. Without feedback, the practitioner may assume a favourable outcome and continue to practice in the same manner (Jarvis, 2012).

However, receiving feedback and gaining self knowledge can be uncomfortable and difficult. Practitioners may wish to perceive themselves positively and focus on feedback that reinforces their image as a capable person (Dunning, 2006). Indeed, some may be motivated to defend the ego and not respond well to feedback from others (Bollich, Johannet & Vazire, 2011).

Evidence from the third study in this programme of research (see Chapter 5) would seem to indicate that some coaches believe that regular supervision is unnecessary and that coaches should be able to self identify when supervision is necessary. Alternatively, others may misunderstand the potential support provided and view supervision as an unnecessary form of monitoring practice (see Chapter 5).

However, it would appear that many of the experienced practitioners who took part in the survey appreciated the value of supervision, with 56% indicating that they currently receive supervision and 57% reporting that they had discussed the boundary between coaching and counselling with their supervisor. Coaches and counsellors also indicated that they relied on peers and other professionals for guidance and support in addition to supervision.

4.5.8 Chapter Summary

This chapter discussed the diversity of experience that professionals bring to the coaching industry and how their tacit knowledge and skills inform coaching practice. When working with clients, practitioners may encounter issues that indicate a client is experiencing mental health difficulties or, conversely, is ready to focus on strategies for growth and development. Capabilities for recognising and managing mental health difficulties were considered and concepts of boundaries between coaching and counselling were explored. The importance of working transparently and ethically with clients was discussed. In addition, the support offered by supervision for both counselling and coaching practitioners was reflected on. The findings from the study of experienced coaches and counsellors present a valuable contribution to understanding practitioners' perceptions and experiences of working with the boundaries between coaching and counselling in practice. Whilst the opinions expressed by participants may not reflect the opinions of the general population, this study provides a valuable insight, expressing the views of practising coaches and counsellors and illuminating the dilemmas that practitioners encounter when negotiating

and working with boundaries in practice. The research has highlighted particular concerns relating to working with intuition to inform decisions and judgements, assessing client mental health and integration of practice. This information is important for the counselling profession and coaching industry. Understanding the experience and perspectives of coaches and counsellors will help to identify needs for ethical guidelines and inform requirements for education.

The next chapter expands on the survey research and presents the findings from the third study in this programme of research. The qualitative study provides a deeper understanding of practitioners' views and experiences of working with practice boundaries.

Chapter 5 Practitioners' Experiences of Boundaries

The preceding chapter provided a detailed explanation of the outcomes from the quantitative study of experienced coaches' and counsellors' experiences of working with the boundaries between coaching and counselling in practice. The research identified the ethical issues practitioners may encounter when meeting clients' needs and discussed the experience and intuition coaches and counsellors rely on to inform their practice.

This chapter will expand on the findings of the second study and provide an idiographic exploration of practitioners' perceptions of boundary management. The third study will, therefore, utilise a qualitative approach to gain an in-depth understanding of practitioners' lived experiences of working with the boundaries. A rationale for a phenomenological approach to research will be discussed and a methodological framework for interpretative phenomenological analysis explained. Interpretation of themes will be presented and illustrated with excerpts from narrative accounts to provide an in-depth understanding of practitioners' experiences. Explanations of interpretations and how the results relate to previous research will be considered. In addition, participants' concerns relating to ethical guidelines, meeting clients' needs and public perception of mental illness will be explored.

5.1 Introduction

The previous study provided a broad overview of coaches' and counsellors' opinions. To accommodate a wide range of responses, the quantitative approach reduced boundary issues highlighted in literature to discrete factors that could be measured and scored. Whilst questionnaires may provide generalised information about people's attitudes, behaviour and beliefs, the data rarely captures the nuances of the targeted phenomena. Interactions with others can be multifaceted and it could be suggested that context, personal history and mood may affect a person's

perception of a situation. As the debate surrounding the boundaries between coaching and counselling has largely centred on quantitative experimental research, theoretical opinion, and divisive professional interests (Maxwell, 2009), it could be argued that suggested boundaries may not accurately reflect the complexity of working with clients in practice (Strawbridge & Woolfe, 2003). Whereas quantitative research objectively measures human behaviour, qualitative research represents the importance of incorporating subjective experience to inform understanding (Giddens, 1991).

Experience is specific to each individual's context and relative to the personal perceptions (Giddens, 1991; Goffman, 1959). A person's perceptions may include thoughts, feelings, assumptions, biases, and behaviours. As such, a quantitative approach may not be the best means by which to reliably investigate these aspects (Thyer, 2008).

5.1.1 Understanding practitioners' perspectives

Qualitative research aims to incorporate an individual's subjective experience to provide a deeper, richer meaning. Previous qualitative research into practitioners' opinions of working with the boundary between coaching and counselling (see Chapter 2) focused on issues arising for either counsellors or coaches, with early research focusing on counsellors transitioning into coaching to expand their practice (Hart, Blattner & Leipsic, 2001; Alves Marques, 2006; Skerten & Chapman, 2006; Jopling, 2007; Griffiths & Campbell, 2008; Jinks, 2010) or executive and organisational coaches' experiences (Maxwell, 2009; Price, 2009; Turner, 2010). The studies focused on understanding practitioners' views of the differences between approaches and how the boundaries are managed with clients. A review of the previous research indicated studies had investigated the perspectives of specific groups of counsellors and coaches who employed differing methodologies (see Appendix N). The previous research included quantitative and qualitative studies. As in the first study (see Chapter 3), a mixed methods approach, which

incorporated a survey and qualitative interviews, was employed by Turner (2010) to explore executive coaches' opinions. Additionally, reflecting the rationale for the second study in this programme of research (see Chapter 4), Price (2009) used a quantitative survey approach to gain a broad understanding of organisational coaches' views. The remaining six studies utilised qualitative interviews to gain a deeper understanding of the practitioners' perspectives.

Qualitative research aims to incorporate an individual's subjective experience to provide a deeper, richer meaning. Previous qualitative research explored the views of specific groups of practitioners and, therefore, included differing participant samples. Hart, Blattner & Liepsic (2001) investigated the views of 30 counsellors or therapists who had transitioned to counselling. Skertern & Chapman (2006) and Griffiths & Campbell (2008) examined the experiences of life coaches. In addition, Griffiths and Campbell (2008) also incorporated the experiences and perceptions of nine life-coaching clients.

Executive coaches' perspectives were investigated by Alves Marques (2006), Jopling (2007) and Maxwell (2009). All of the studies stated that many of the participants had previous counselling or psychotherapy experience. Alves Marques (2006) examined the views of four coaches, all of whom had counselling or psychotherapy experience. In the study conducted by Jopling (2007), 8 of the 12 coaches that took part also had counselling or psychotherapy experience. In addition, in the qualitative research undertaken by Maxwell (2009), 5 of the 8 participants had counselling or therapy experience.

In the previous research, different methodologies were utilised to gain an understanding of views and opinions. Whilst the majority clearly stated the methodology used, Skerton & Chapman (2006) did not provide any details of the method employed for gaining data or how the participants' narratives were analysed. Hart, Blattner & Leipsic (2001) reported using structured telephone interviews, however no method of analysis was

identified. Alves Marques (2006) presented a more comprehensive account and stated semi-structured interviews had been employed to elicit opinions from the coaches in her study and thematic analysis had been used to examine the outcomes.

To try to analyse the experience by breaking it down into component parts, without acknowledging the meaning and interaction with the world, arguably diminishes the uniqueness of human existence (Cooper, 2003). Instead, an individual's experience needs to be understood in the context of how they exist in the world and how they relate to the world around them. Moreover, the emphasis should be focused on how the experience is actually lived (*ibid.*). Comprehending the practitioners' phenomenology and the context of their understanding was important in four of the qualitative studies. Griffiths and Campbell (2008) used semi-structured interviews to gain a phenomenological understanding of five life coaches. The participant narratives were explored by using comparative analysis. Jopling (2007) discussed opinions with participants in open interviews and used Stevick-Colaizzi-Keen's analysis to identify themes. Jinks (2010) carried out semi-structured interviews with four coaches using Skype and analysed the interviews using interpretive phenomenological analysis. Maxwell (2009) also utilised IPA to explore the phenomenological perspectives gained from semi-structured interviews with executive coaches.

5.1.2 Interpreting experience

Phenomenology argues that, rather than being a fixed physical entity, people interpret objects and entities based on their own subjective experience (Spinelli, 2005). Phenomenology is concerned with the study of people's perception based on subjective experience, emphasising personal interpretation and meaning. To gain an understanding of how the person relates and interprets their world, Van Deurzen (1995) suggests adopting a descriptive approach to helping the person describe in detail their 'lived-in world', thereby generating an in-depth understanding of their

unique perspective (Cooper, 2003). The qualitative interpretative phenomenological approach provides detailed comments that are respectful of the individual perspective. As a consequence, the method can be useful for gaining insights into motivations and actions, rather than accepting common assumptions about phenomena.

Merleau-Ponty (2012) suggests that, rather than solely perceiving the world cognitively and visually, people experience their world with the whole self, through their body as well as their mind. People attempt to understand the world by making sense of their experiences by adding meaning (Spinelli, 2005). The way that a person acts makes their self and their lived world significant and meaningful. People are, therefore, connected to the world through an embodied consciousness. The body and the world are seen to be linked, with the body at the heart of the lived world, creating a symbiotic system. Perceived truth is derived from the system, by making sense and finding meaning in a situation. However, what is true in one situation may not be relevant to a similar but different situation, depending on the context (Langdridge, 2007).

5.1.3 Aim of Study

Whereas previous research has targeted either counsellors transitioning to coaching or coaching, this study uniquely integrates perspectives from both coaches and counsellors. The research aims to gain a greater appreciation of practitioners' experiences of identifying and managing boundaries between the helping approaches.

The qualitative research aimed to explore practitioners' perceptions of the objectives of coaching and counselling, perceived similarities and differences between the approaches, and how boundaries are defined and identified when working with clients. In addition, practitioners were asked to reflect on possible strategies that may be beneficial to help coaches and counsellors effectively manage boundaries in practice.

5.2 Methodology

To augment understanding from the quantitative research in Chapter 4, this study aimed to contribute in-depth understanding of practitioners' experience of phenomena in context. The interpretative phenomenological approach enables the researcher to engage in detailed analysis of individual perspectives to gain an understanding of the divergences and commonalities within a small group (Smith, 2004; Smith, Flowers and Larkin, 2009).

5.2.1 Acknowledging the Researcher's Contribution

In contrast to many qualitative methods, interpretative phenomenological analysis acknowledges that the themes and knowledge that come from the study are co-constructed between the participant and the researcher. As discussed in Chapter 3, rather than being a detached observer, the researcher responds reflexively to the experience shared by the participant (Lyons & Coyle, 2007). Therefore, it is fundamental that the researcher is conscious of the part that they play in the interpretation of the data. This reflexivity involves reflecting on their personal perspective, interpretation of the data, and their own demographic background (Langdrige, 2007). The perspective of the researcher needs to be transparent and considered in the context of the study. *To illustrate my position, an overview of my background and perspective is presented in the preface at the front of this thesis.*

5.2.2 Interview

IPA brings out the individual's perspective of an experience. The idiographic accounts can be used to challenge commonly held assumptions of phenomena. As a result, the findings may be used to inform or support theories and policy. Therefore, to maximise depth of disclosure and gain information for analysis, it may be beneficial to adopt an open, conversational approach when interviewing, with a minimum structure (Lyons & Coyle, 2007; Langdrige, 2007).

When generating the interview questions, I reflected on the learning opportunities from the previous IPA study (see Chapter 3). I was aware that the interview schedule for the novice and newly trained coaches had not yielded the full or expansive answers that had been anticipated. Further, the delivery of questions had followed a structure rather than accommodating the interviewees.

To encourage participants to provide full and detailed accounts, the interview schedule (see Appendix P) for the current study was designed to reflect the research questions and allowed questions to be asked sequentially or flexibly to accommodate the flow of conversation with the interviewee (Marlow, 2010).

The authenticity of unstructured interview questions can strengthen rapport and engage the participant in a more conversational style of interview (Shaw, 2008). As a consequence, the participant may feel more disposed to offer richer and more candid accounts of their experience (Allen, 2013). It was felt that this flexibility was essential to maintaining rapport with the participants in the study and following the direction of their account. By doing so, it was hoped that new topics may arise, or new directions, which were relevant but had not previously considered, may emerge. Therefore, should new topics or factors surface that inform the participant's world view, I planned to explore these more by using open-ended unstructured interview questions (Bailey, 1994). It was thought that valuable insights may be gained during unexpected digressions. Therefore, the wording of the questions was adaptable, allowing for modification to follow the participant's pace and narrative.

5.2.3 Participants

Polkinghorne (1989) suggests that, to accommodate differing perspectives, it is beneficial for all participants to share a common experience, but vary on a number of demographics. I therefore endeavoured to attract a variety of coaching and counselling practitioners

to take part in the research. Participants were recruited concurrently with Study 2.

Experienced coaches and counsellors were invited to take part in research interviews investigating practitioners' perceptions of the boundaries between counselling and coaching. The request was posted on professional pages on LinkedIn, Twitter and Facebook social media sites (see Chapter 4). The invitation provided information about the purpose of the interviews and asked potential participants to contact me for further details or to express their interest.

Twenty experienced practitioners were interviewed for the study. The participants identified themselves as coaches, counsellors, therapist-coaches, coach-therapists and personal consultants (see Appendix Q for a summary of participants' occupations and experience).

5.2.4 Procedure

Reflecting on the outcomes of the IPA research in the novice and newly trained coaches mixed methods study (see Chapter 3), I concluded that using telephones or Internet communication may impede the flow of conversation during the research interviews. As a consequence, the interviews for the third study were conducted face-to-face, in the most convenient location for the participant. Consequently, the interviews took place in participants' homes, personal offices or agreed Regus managed offices.

To ensure each participant was fully informed of the purpose of the research, and what taking part in the study would entail, before commencing the interview the practitioners were provided with an information sheet (see Appendix N). The information sheet detailed how interviews would be conducted and how information would be securely stored. I also informed participants that a digital voice recorder would be used to record the interview. Participants were assured of confidentiality and anonymity and informed that they could stop the interview or withdraw

their content at any time. Further, any experiences that had been shared would not be identifiable in any quotes or excerpts that were used in reports of the research. Each participant signed a consent form which indicated that they had received this information and were willing to participate in the research (see Appendix O).

The interviews were conducted between October 2012 and February 2013. The interviews lasted between 40 minutes to one and a half hours. The length of the interview was determined by the amount of information the participant was willing to share. To reflect the personal and idiographic nature of the research, all participants were given a pseudonym, rather than code or number, when reporting their contribution to the research. The participants were invited to choose their own pseudonym and I assured them that they would not be recognisable in any subsequent published works. Hard copies of the transcribed interviews were anonymised and identified solely by the participants' pseudonym. Each interview was recorded separately to a .WMA sound file, which was identified by the pseudonym of the participant. The transcripts and voice recordings from the interviews were stored on a secure password protected USB storage device. During the study, transcriptions were only available to me and the participant, should they request it.

The participants were given the opportunity to review their transcripts or receive a copy of the recording. One participant requested a copy of the digital voice recording for personal development purposes. There were no requests to see transcripts or withdraw from the study. At the end of the interview, I informed the participants that some excerpts or quotes may be used to illustrate the reported study. Two participants asked that they were shown any excerpts related to experiences they had shared, to ensure their clients' anonymity and confidentiality.

5.2.5 Analysis

The interpretative phenomenological analysis of the experienced coaches' and counsellors' transcripts follows the iterative hermeneutic process

described in Chapter 3. An example of analysis from the first hermeneutic cycle can be seen in Appendix R.

Presenting research findings is the most important part of the interpretive phenomenological analysis process (Smith, Flowers and Larkin, 2009). As such, the results for this study are substantial and incorporate a large proportion of interview excerpts. In addition, the importance of the extract will be described. Initially, I will provide an account of the quote and contextualise the interview excerpt before providing an interpretation which situates the example within the research. As IPA is a methodology that aims to reflect interpretations of participants' accounts (Smith, Flowers and Larkin, 2009), the reader is invited to consider their own reactions to the themes presented, to encourage full engagement with the shared experiences.

5.2.6 Boundaries

The 'Boundaries' superordinate theme incorporated practitioners' beliefs and experiences of identifying, managing and working with the boundary in practice. This included contracting with clients, identifying clients' needs, views on maintaining separate practice, and working in the grey area between coaching and counselling. In addition, several practitioners voiced concerns about professionalism and introducing regulation into both coaching and counselling practice.

5.2.6.1 Managing the boundary

When discussing management of boundaries, many of the coaches who took part in the study referred to establishing boundaries and setting expectations through contracting before working with clients. Gwen emphasised the importance of agreeing contracts before working with a client as a coach and a counsellor.

"It's also about contracts, agreeing the role, boundaries, expectations, needs. In the corporate obviously you've got things around fees and structures and terms of reference. With, in terms of counselling, yes, I provide, we do that, we do an agreement and I

get people to sign a contract in terms of cancellation and things like that. So there's still the similarity that goes across, it's just slightly, again it's to do with the difference context."

Gwen's personal values and beliefs in professional responsibility were core to both her coaching and counselling practice. Gwen was very clear that establishing a contract, agreeing what was required and meeting the client's needs were fundamental to her coaching practice. She explained how being seen to be professional was extremely important to her. Gwen described how her frame of reference for 'professional' was based on her perceptions of her father and brother who had roles in established professions. Gwen felt that, by gaining her knowledge and experience in a diverse range of roles, she had not achieved the same professional status as other members of her family. Therefore, demonstrating professional credibility in her work was important to Gwen. As a consequence, Gwen adopted a structured and business-like approach to her practice. This was reflected in her reference to fees, structures and terms of reference.

In accordance with demonstrating professional values that would be respected by her family, working ethically also had great significance for Gwen. As a result, contracting was also seen as a fundamental part of maintaining boundaries between coaching and counselling. However, as Gwen had gained counselling and coaching skills, she was conflicted about working with clients in both modalities. Gwen explained that she was sometimes troubled when she identified that coaching clients would benefit from a counselling intervention. Whilst Gwen principally worked within organisations, and therefore had tripartite contracts, she shared that she would re-contract with a client privately to provide counselling services, if she felt that the client would benefit from additional professional assistance. However, she would not breach the terms of her coaching contract. In our discussions, Gwen endeavoured to portray self-assurance in the approach she adopted. However, underlying

consternation, due to her perception of being in a precarious ethical position, belied her confidence.

In addition to utilising coaching contracts to manage practice, Bethany highlighted the difference between the content of coaching and counselling contracts. Bethany had worked in organisations as a coach and trainer for many years and had recently started counselling training. She began by explaining her perceptions of the benefits of coaching contracts.

“So for me the coachee is always the coachee. The client is usually the person paying for it, and again, even that’s contracted, so how much does the client want to be involved in it. So the client, if they’re paying privately, the client and the coachee are the same thing for me, but if the organisation is paying, or have referred the person to me, they’re the client, so then they might be a three-way contract to decide how much they want to be involved? How much they need to know? What is it they want out of it? Is it a given that that’s what has to come from it in order for me to be paid? And so then there’ll be a three-way contract. So coaching at the moment is, it’s odd, it actually sounds harder than the counselling but I’m used to that world of those quite firm boundaries. I find it harder in the counselling side of things because the contracting that I’ve been taught so far, is actually far woollier. So for me it’s like, *well*, where’s the contract? How do you agree? It’s, there’s no, I can’t get out my little aide memoir and go through it like I would, it’s much woollier, much vaguer, and I’m obviously much more experienced in coaching; counselling is far newer for me, so I’m finding my way through that, *and it* feels harder to negotiate or to even think about it.”

Bethany liked the structure and transparency of coaching contracts. She valued the opportunity to define the content of sessions in advance and establish expectations for the coaching process. By clarifying the client’s

expectations, Bethany felt she would be confident in meeting the client's needs and requirements. To illustrate how she managed client expectations, Bethany described her process for agreeing contracts and boundaries with clients and coachees. She referred to an aide memoir which she found to be very helpful. This aide drew on her initial coach training and incorporated a drawing of a Venn diagramme which clearly demonstrated how similarities in the areas of counselling, coaching and mentoring may overlap and intersect. Bethany emphasised the importance of transparency and explained that she was clear with her clients that some work may draw on aspects of counselling or require mentoring input, but would maintain a focus on the issues that the client wished to work on.

Bethany's account of her counselling practice and her discomfort with identifying appropriate times to construct effective contracts with counselling clients reinforced her preference for being able to agree boundaries in advance. The agreed contract appeared to offer her a way of holding a constructive space for the client and maintaining a focus on objectives, whilst working within her competencies. Further, it also allowed the client to have confidence in the focus of the sessions, the coaching approach that would be used and expectations of the service that would be delivered. It was evident that Bethany felt uncomfortable with not being able to establish these parameters in advance. The 'woolly' counselling approach felt less tangible and more difficult to control.

In addition to establishing clear boundaries through contracting, several of the practitioners mentioned that they could 'feel' when the content of sessions, or interactions with clients, had moved into a different area. Clare explained how she felt when encountering the boundary within the coaching space.

"It's almost like an intuitive thing. I wish I could describe it more succinctly than that, but it's almost like the hairs on the back of your neck start to stand-up and you think 'right okay, now we're going down the different avenue'. And there's an energy that comes into

the room I think when someone suddenly starts to realise that, you are someone who could maybe understand something painful, difficult, that would require more than a coaching session could offer. And I think when I feel that sort of 'hairs on the back of my neck' feeling. It's a sort of a sign that I need to be very careful what I do at this point."

Clare's description showed that her intuitive awareness was experienced as a somatic feeling in her body. She also described a change in energy or the dynamic in the relationship she felt when the client encountered something that was painful and difficult to manage. This led to Clare being aware that she needed to proceed with caution and be mindful of how she worked with the client in this situation. Clare's description of the somatic feeling could also be associated with a fear response. Whilst Clare was an accomplished therapist, she was adamant that she would not counsel a coaching client. Clare felt that the helping relationship was very different between the approaches and, when counselling, she was mindful of removing all evidence of her self from the counselling room. For instance, Clare discussed only having counselling literature on the shelves of her bookcase in her counselling rooms. Clare was very clear about maintaining strong personal boundaries when counselling clients. It was, therefore, possible that, when the direction of the coaching conversation moved toward psychological problems, Clare became instinctively aware of the need to protect her self.

5.2.6.2 Acknowledging the middle ground

Although Clare felt secure working with discrete areas of practice, many coaches and counsellors described how they had come to question the feasibility of maintaining clear boundaries. Emily explained that she had endeavoured to keep coaching and counselling distinct.

"My attitude initially was to keep the two disciplines quite separate and to be quite strict about that, I am, but I'm kind of increasingly, as I'm thinking of it, especially as I'm having this kind of third

dimension making me think about it in a different way, both wondering how practical that is... Also how correct it is, ethically for the client.”

Emily appeared to consider the reasonableness of implementing boundaries between coaching and counselling as she heard herself speak. Emily had worked as an organisational coach and had taken the decision to take a Masters course in counselling and psychotherapy at University to develop her knowledge and expand her practice. As part of her work role, Emily worked with people who were distressed, but would not engage with counselling. She had found her clients were willing to build a supportive relationship, which focused on practical strategies to help them move forward. However, during the interactions, Emily felt conversations often veered towards aspects that would be more appropriate to address in counselling. Given the vulnerability of her clients and the trust invested in developing the supportive relationship, Emily questioned the assumption that referral to a counsellor was in the client’s best interest. The ethical dilemma of breaking a bond of trust within the helping relationship was also a concern shared by Robert.

“They would just lose total faith in anything, wouldn’t it? And they’d just, ‘look, well I tried to ask for help and as soon as I did, you went, can’t do that, and that, so yeah, well in that case I can’t try it again, because I’m not going to be rejected again’, or depending on what the issues are. That could have such a detrimental effect. Huge, with no-one to pick it up, and even if somebody was, they’re saying well you can go off over here, you may have lost them. Yeah, and that to me is not ethical in any shape or form.”

Robert reflected on the difficulties and responsibilities of encouraging somebody to ask for help. He explained that building a relationship with somebody, when they felt vulnerable and had expressed feelings they may not share with anybody else, was a concern. Robert focused on his duty of care and the responsibility of holding the client in a safe space.

Robert's compassion and emotion were evident as he explained his position. Robert speculated that appearing to reject a client by referring them, when they had invested trust and faith in the helping relationship, could potentially cause harm and prevent the person from trusting another professional in the future.

Joanne emphasised that the aim of both coaching and counselling was to help and support individuals. She described a boundary as a 'fine line', which was easily crossed.

"I think it's a very fine boundary that gets crossed all the time. People who are trained coaches will counsel. Counsellors will coach and so some of it is really about how you just recognise there's a spectrum of activity that happens when you work with another human being. And we can call them different labels if we want, but it's about working with an individual."

Joanne introduced the concept of a 'helping spectrum'. She implied that coaches either knowingly or unknowingly counselled clients as part of the supportive relationship. Joanne recognised the importance of the helping relationship and human interaction. In addition, she noted that counsellors also include coaching techniques in their practice to help their clients overcome blocks and move forward. Joanne had worked as a human resources consultant with senior executives and managers for many years. As a result, she had gained coaching skills and experience of managing emotional situations in the workplace. Joanne explained that the people she worked with often concealed underlying difficulties. As a result, she had become concerned about her ability to adequately support people with their stress and distress. To enhance her confidence in managing situations effectively, she had recently started a counselling course to improve her understanding and capabilities. The knowledge gained from her course had been combined with her practical experience and informed her perspective on the issues that are addressed across the 'helping spectrum'.

Amanda expressed her concerns about wanting to help clients. She was a fully qualified counsellor who had transitioned to work as a coach. Whilst Amanda enjoyed her coaching role, upon occasion she identified underlying distress in her clients and felt motivated to help them with their difficulties. Amanda's underlying discomfort and conflict was evident in the interview. She described wishing to help her clients whilst honouring the contractual agreement with a third party. As a consequence, Amanda was concerned that she may overstep the bounds of her contract and breach ethical guidelines, thereby putting herself at risk.

"I think for coaches, who are coaches, a lot of the ones I know would just go 'oh I can't deal with that, I'm not qualified' and direct them to somebody else, you know, like a counsellor after the programme. And I think where I feel I'm in a tricky position is that I can see that I could help and my tendency is to, but is that OK? And I think what I feel is that, I know my intention is good, but what I sometimes feel is, 'Am I putting myself in danger? Would I be criticised for that if it didn't go well? Would I ever be putting myself in a position of danger ethically?' Even though I know that my intent is very good."

In conversation, following this explanation, we discussed Amanda's need to help. During our discussion, Amanda became conscious of her inclination to 'rescue' clients. Amanda shared that she had discussed management of boundaries in supervision previously. However, following her realisation, she felt that it would be helpful to explore this aspect of her self in supervision to ensure safe, ethical practice in the future.

Jenny also described a spectrum between coaching and counselling. She explained that she felt she had the skills and competencies to work in the middle area and it was right to so.

"The coaching/counselling boundary, I suppose for me there is, if we put on a spectrum, there's straight coaching here, and they're

straight counselling here, or therapy here and then there's an awful lot [in] the middle, where you do a bit of this and a bit of that and that's the right thing to do."

Jenny's explanation expands on the concept of a helping spectrum. Whereas Joanne had alluded to coaches, including a small amount of counselling in their practice and counsellors using coaching techniques to move their clients forward, Jenny described working in the middle ground. Instead of a boundary line, which was loosely acknowledged, Jenny believed that the middle ground was relatively broad and practice in this area was malleable. Indeed, instead of adhering to theoretical boundaries, practitioners, with appropriate skills, utilised their capabilities in context to help their clients.

Christine had spent many years working as a therapist and had attended various coaching workshops to extend her practice. She had recently decided to incorporate both counselling and coaching in her work with clients, as she felt that using just one approach was not sufficient to meet all of her clients' needs.

"I just think that there is often an overlap when people come for psychotherapy. They come for what they understand... you know deep rooted issues, but then I find there's always the stage, you know during psychotherapy, when people have dealt with a lot and they're thinking 'What now? What do I do with it now?'"

Christine expanded on her explanation and described her work as a counsellor. She explained that, in her counselling practice, she had adopted an integrative approach. Predominantly, Christine had incorporated a humanistic, person-centred philosophy to her practice, which focused on helping individuals to become 'all that they could be'. Christine's account illustrated that, rather than working with an individual until they felt more able to cope, Christine's approach encouraged growth and personal development to enhance well-being. Christine valued the

concept of holistic development and natural progression. As a result, she had attended coaching workshops to learn skills and techniques, which could be utilised to help her clients move forward.

Sandra, on the other hand, was tentatively considering the challenges of integrating coaching and counselling in her practice. She described a hypothetical client may come for coaching, but who needs additional support in identifying what underlies the persistent blocks they're trying to overcome.

“There’s something for me about finding a way to honour all of that, which is something that is not completely worked out really. It’s just I’m still in that process of sorting that out. Exploring it, rather than sorting out probably.”

To help conceptualise working with a combination of counselling and coaching, Sandra was beginning to incorporate a holistic framework in her practice. Whilst Sandra appreciated the benefits, there appeared to be elements of integration that Sandra had not yet rationalised. Primarily, Sandra was concerned with managing the transition in helping the relationship between the counselling and coaching approaches. She discussed differences in levels of disclosure and dynamic interactions within the relationships. Whilst Sandra was enthusiastic about the integrated framework, she also seemed to have reservations about how it would work with some of her client groups.

Not all practitioners embraced the idea of integrating helping approaches. Dave was sceptical about counsellors and psychotherapists wanting to overstep their boundaries when issues arose that exceeded the contractual agreement.

“What I worry about is that, I do worry about it more from the other side, I think that from networking about and coaches that I’ve spoken to, who are from psychotherapy, who can’t turn the psychotherapy bit off and it’s in whose service? It’s that you’re really

in the service of the client. They haven't come here to discuss, child abuse, or whatever else that's come up. So it, that's, but then they'll go there, they'll, rather than re-contract and say, 'Actually I'm not dealing with this. If you want to speak about your child abuse you're going to have to do that with a therapist and that cannot be me'. Some of them would do that and some of them won't and, I'm not really making a value judgement on it, well I am I suppose, but I'm thinking, 'Okay now you're muddying the waters'. But they're always going to be muddied because of the people I see, are they happy campers? Generally no, of course they're not, and some, even if someone's come to see a life coach, he assumes there's something bloody wrong."

Dave raised some interesting issues. As much as Dave claims he does not wish to appear to be judgmental, he made it abundantly clear that he does not approve of counsellors or psychotherapists, with additional skills, re-contracting to offer further services to the same client. Dave's values were obviously different to those of Joanne, Amanda, Jenny and Christine. Whilst Dave had received comprehensive therapeutic training and demonstrated a broad philosophical understanding, his personal values and beliefs did not support combining helping approaches. Dave acknowledged that his clients may not be happy and they may have approached him (as a coach) because they wished to address a problem. However, for Dave, working in the middle ground was a matter of blurring client expectations. Dave was clear about what services he would provide and inferred that he carefully screened his clients to ensure he would be able to effectively help them with their needs. Dave discussed a number of issues which he would not be willing to address in practice. He stated that he would only work with clients in a coaching context and would not attempt to explore psychological or emotional issues.

Dave was action focused, both mentally and physically. Dave incorporated exercise in his coaching approach and explained that, following initial

consultations, he had informed several clients that he would not be an appropriate person for them to work with. Dave joked and laughed throughout our interview, but used powerful examples of psychological problems to support his view that the two approaches should be separate.

Ruth also strongly believed that boundaries need to be maintained between coaching and counselling. Ruth practised as both a coach and a counsellor, but felt that she would not work with the same client in both modalities.

“How the client sees me, may or may not be different in each instance. So I would personally prefer not to be a coach and counsellor to the same person because there may be different dynamics that arise, which might just make the whole thing tougher. And certainly in the same session, I just think that becomes a *nonsense*, a blurred nonsense... I'm quite cynical about the depth model, and all that so, for me to be sitting here, coaching you and then you suddenly talk about something. How do I decide then that that's going to go to counselling? I mean, what are the criteria for me to shift that process? And I don't really believe it exists. Unless, it's somebody who I can't, who clearly coaching is no longer viable for, because of either levels of distress or motivation, lack of motivation. Actually wanting to go backwards into whatever they want to go backwards into; okay, let's actually re-contract and let's end coaching. But I wouldn't. I personally would not want to then change that into counselling. Because, I just... It just doesn't work for me at all. And I have seen no evidence about the value of it.”

Ruth laid specific emphasis on the word not, when discussing working as a coach and counsellor to the same client. Ruth was almost scathing in her description of utilising both approaches. Importantly, she questioned what specific identifiable criteria practitioners used to consistently identify when the dynamic had changed and when a difference in helping approach was required. Whilst Ruth's position may appear a little

defensive, it is pertinent to note that, rather than being angry or frustrated, Ruth was simply very firm in her belief that changing between coaching and counselling was not acceptable to her. She questioned how viable the transition was and whether there was any evidence that combined practice was effective or of value to the client.

5.2.7 Differences

The *differences* superordinate theme encompassed the factors that experienced practitioners identified as different between the helping approaches. The overarching theme included perceptions of coaching as a positive intervention and counselling as focused on negative aspects; differences in the regularity and length of sessions, the purpose defined by the client, comparison of working at the surface or delving deeply into past history and containing or exploring client issues. All of the participants were asked about both the similarities and differences between coaching and counselling. The overwhelming majority stated that interpersonal and communication skills were the most fundamental similarities. It was interesting to note that many found it difficult to discuss similarities at length, instead focusing on the differences between the approaches. This may be due to a cognitive dissonance in acknowledging the corresponding qualities of the approaches, whilst concurrently focusing on the boundaries between the two. The only three exceptions to the predisposition to readily emphasise differences were Audrey, Rachael and Robert, who conversely found it difficult to identify differences between counselling and coaching. Robert explained his quandary.

“I really struggle to actually identify what the real differences are. Because if I’m working with solution focused in counselling, then what’s the difference per se? And when I work with young people as well, I feel that, in a way, you are coaching. But then am I doing anything different than if I was counselling? And I really struggle to differentiate, I have to say, between the two.”

Robert raised an interesting point, related to application of psychological theories in practice. Many psychological theories have been adopted to underpin coaching practice; however, sharing models and concepts may add to the confusion between helping approaches. Robert and Sandra both described using approaches that were similar to coaching when counselling children. Robert adopted a solution focused approach and found it very difficult to identify the difference between brief solution focused therapy and coaching. Sandra also acknowledged that, when working with children, she tended to adopt more of a coaching structure. She felt that working in a way that blended coaching and counselling had influenced her decision to integrate coaching and counselling. Sandra explained that she had previously worked as an integrative counsellor and incorporating coaching felt like a natural transition.

Audrey explained that she felt there were many similarities in the helping approaches due to the breadth of counselling modalities. Audrey enthusiastically shared her experience of developing her own model for integrating coaching and counselling. She discussed research that indicated there were over five hundred approaches to counselling and concluded that breadth of theoretical frameworks was the main reason for the overlap with coaching approaches. Audrey's integrated model was based on her personal experience, training and knowledge. Whilst Audrey portrayed herself as knowledgeable and authoritative regarding theories and application, when asked to explain a particular perspective she became defensive. Her blended approach was directive and informed by Audrey's values and beliefs. She explained that she had already trained other coaches and counsellors to implement her approach and was dismissive of other methods of helping. As most of Audrey's interview focused on her blended approach, I felt that any quotes or extracts may have resulted in identification of the participant and promotion of the approach. Therefore, excerpts from Audrey's narrative account have not been included so as to protect her anonymity.

5.2.7.1 Aspects of temporality

Temporality was mentioned as a difference in various forms by all of the participants. These included the differences in the length of sessions. Counselling was associated with the 'fifty minute hour', whilst some coaching sessions were described as taking three hours. The length of time between sessions was also seen as different. Several practitioners explained their coaching engagements could entail breaks of between three to six weeks between sessions, whilst counselling was more likely to provide regular weekly support for vulnerable clients. Many of the coaches and counsellors also mentioned the supposition that coaching focuses on the present and future, while counselling is past orientated. However, Susan, Clare, Rachel, Olivia, Trudy and Heather disputed this difference and used various versions of the phrase 'the past is always present' to explain their belief that an individual's past affects their thoughts, attitudes and behaviour in the present. As a result, they felt that this distinction was spurious and misinformed.

5.2.7.2 Purpose

Ruth stated her strongly held belief that the differences between coaching and counselling centred on the client's needs and their reason for seeking assistance.

"I have a strong belief that counselling and coaching are differentiated by the point of entry of the client; the purpose of the interaction; and the desired outcome of the interaction."

From Ruth's explanation, I interpreted 'point of entry' to refer to the client's psychological well-being. Whilst this would seem to be rational criteria, it could be argued that clients are unaware of their underlying psychological difficulties or actively seek to conceal them. Therefore, the client may choose which helping approach they wish to receive, regardless of the realities of their psychological well-being. Ruth used a NLP approach in her coaching and counselling practice. She appeared to feel comfortable and confident within a controlled structure, where expectations had been

identified and mutually agreed. Ruth explained that, in her practice, she established well-defined contracts with clients, which clearly specified objectives and expectations. Ruth would then refer her clients to the purpose of the intervention should the client appear to be discussing psychological issues.

Joanne agreed that coaching clients often come to coaching with an objective that has been either set by themselves or established by the organisation that has arranged the coaching sessions. Joanne also discussed the clients' point of entry and compared the focused coaching approach with the purpose of counselling.

“So coaching, and my experience of it, was very focused, quite action orientated, quite goal driven. And so typically people would come almost self diagnosed already with “I need to feel more confident; be more assertive; manage my time better; reduce conflict”. And so there would almost be this packaging up of something and then I would work in quite a structured way with that person and we’d probably have to do a review of progress. With counselling I’ve questioned really how do you know, as a counsellor, that you have done a good job? Because I think that it is a very open process. And for me, quite a lot of that is just about how do you empower an individual to become much more self aware. And that doesn’t mean that necessarily they will be hugely more skilled or hugely happier. But it does mean that they are much more conscious of what is going on for them and able to think through the choices that are being made. And so I think that you don’t necessarily have clear outputs. And there’s a lot more internal, so there’s quite an introspective nature to counselling.”

Joanne uses some interesting idioms in her account of the client’s choice of helping approach. Initially, Joanne uses the phrase ‘self diagnosed’, which would appear to imply that she believes many coaching clients have underlying issues. ‘Packaging up of something’ would seem to describe

neatly containing the process. Joanne implied that she would combine techniques or strategies that would specifically aim to help the person address their self identified objectives, which are subsequently reviewed to evaluate effectiveness. Counselling, on the other hand, was portrayed as exploratory and transformative, an empowering process of bringing the pre-conscious to consciousness and gaining self awareness. Whilst Joanne enjoyed being part of the holistic development, she also mentioned the lack of tangible evidence that she had made a difference. However, the uncertainty was not uncomfortable or challenging to her personal self efficacy. From her body language and tone of voice, it appeared to be experienced as a mix of curiosity and acceptance.

Robert felt it didn't matter whether people come for coaching or counselling; either way, they were seeking a solution. This may reflect his professional approach to helping, or his own preference for identifying a solution. Robert believed that change was achieved due to the rapport that was developed within the relationship and helping people to identify patterns of behaviour, which may be blocking them from achieving their required outcomes. He again mentioned his confusion and difficulty in explaining what differentiates coaching and counselling. Questioning the differences between the helping approaches and reflecting on possible explanations was a dominant thread throughout Robert's interview.

"I don't actually see a fundamental difference between what you're doing, because at the end of the day it's still about the rapport. It's still about having, most people, do most people come to counselling for a solution? I don't know, that's a *good* question. They're coming to you for a reason aren't they? I suppose you are coaching them in a way because you're looking at how they've always dealt with things and if that isn't working, how can they do it differently to get a better outcome? So I really struggle between the definitions of the two, of actually what is the difference when I'm in a room? I'm sure

there are times when I could be sitting there thinking, “Am I actually counselling or am I coaching or actually does it matter?”

Robert became aware of relatable unanswered questions as he spoke. In the beginning, he focused on the importance of the supportive relationship and building a strong connection with the client, regardless of the helping approach. His thoughts were quickly disrupted by considering whether clients shared the same intent in counselling. This may have been influenced by Robert’s use of solution focused approaches in his work. In the circumstances, I felt it was curious that he had not considered the issue before. He questioned the intent further and considered the counselling client’s possible expectation of the process. It was interesting to witness Robert’s contemplation. His confusion and awareness of not being able to his answer his own questions was authentic. He seemed vaguely amused by not knowing and not having considered the questions before. It did not seem to matter to him. Robert considered whether he approached each approach differently. However, he again came back to the thought that it didn’t matter. He had the skills and capabilities to help his clients with either approach. He, therefore, worked intuitively to meet the clients’ needs.

Ruth considered the importance of context when assisting clients. She introduced an interesting example of the common perception that only counsellors and psychotherapists help clients with mental health issues. Ruth had experience of teaching counselling skills and supervising counsellors when they were on placement. She believed that many counsellors were poorly trained in understanding mental health issues. Robert had also shared this concern in his interview. As a consequence, Ruth believed counsellors may not offer the most effective approach to managing psychosis, bipolar disorder and addictions.

“I experienced quite a lot of counsellors who believed that, if an issue is deep or has a mental health aspect, counselling is the activity to help it. And yet they may not always be educated on what

the implications of a particular condition are. So, for example, do counsellors know that in the say bipolar, manic-depressive, whatever title you want to use, a client's highest risk of suicide is when they're feeling great? I don't think all counsellors know that. So if they're working with somebody with a manic-depressive or sort of bipolar disorder, then that can be quite dangerous."

Ruth appeared to have an aversion to the words 'delving' and 'depth'. She explained that she had experienced the consequences of counsellors who believed it was appropriate to explore every issue. In our interview, Ruth's attitude appeared to be one of dismissive exasperation. Rather than delving into past experiences and exploring emotional issues, which Ruth felt may potentially be difficult to contain, she inferred that coaching may prove to be a more effective intervention by teaching skills and tools to manage situations.

5.2.7.3 Containment or expansion

Containment and expansion was a leading theme throughout the research when counsellors and coaches discussed the difference between approaches. Participants discussed holding space for clients to talk and explore their thoughts and feelings. The analogy of packaging that Joanne had used and being packed up, to illustrate how coaching was viewed as controlled, was used by several practitioners. Clare reflected on her practice and felt that the main difference between counselling and coaching was the way the client's experiences and behaviour were unpacked and managed.

"It's about unpacking, it's about one is contained and one is expansive. Maybe that's how I see it?"

The explanation from Clare was tentative rather than a clear statement of her understanding. Ironically, Clare's description of her coaching interactions indicated that, whilst coaching interventions with clients were contained, Clare allowed her self to be more open with her clients.

Conversely, when working with counselling clients, Clare carefully contained her self and was mindful of protecting her personal boundaries.

The idea of containment and expansion was elaborated by Trudy. She shared a metaphor that helped her visualise the difference between coaching and counselling approaches.

“If I have quite a heavy suitcase and you agree to help me carry it across the street. Maybe in psychotherapy, before we cross the street we open the suitcase and we go through every item of clothing and we might, on crossing the street, discard some, keep others and get to the other side and it's all folded neatly in the suitcase. But in coaching, you would help me cross the road with the suitcase. You would help me carry it, but we probably don't really open it or look around in it.”

Trudy had worked as an organisational coach for several years. At the time of the interview, Trudy was close to completing a Masters course in psychological coaching, which focused on psychological theory and frameworks. Trudy showed an eagerness to understand the difference between coaching and counselling. She shared her experiences of working with clients who had demonstrated psychological difficulties in coaching interventions. In particular, she talked about two events that had particularly troubled her. The first related to a client who had indicated suicidal ideation and how she had managed the situation. The second focused on issues of self harm and confidentiality. Both of these clients had appeared to be ‘discreetly packaged’, with no external evidence of their underlying problems. Trudy claimed to be confident that she had worked within her competencies with both clients. However, it was implied that these incidents had motivated Trudy to gain further knowledge and understanding about psychological approaches.

There were several aspects of Trudy's metaphor that reveal her perceptions of counselling and coaching. Psychological difficulties are

conceptualised as heavy to carry and packed up, out of view. There was an element of concealment in the large suitcase. Trudy indicates her understanding of psychotherapy as unpacking every item. However, not all therapeutic approaches are concerned with exploring the past in-depth. Additionally, issues may not be resolved and 'folded neatly'. Coaching, on the other hand, was portrayed as more of a joint endeavour. There is an implication that coaching helps a person bear their difficulties, but does not seek to explore or understand them.

Gwen's account of working with the clients followed the theme of expansion and exploring. She also incorporated the concept of either working on the surface or in depth, delving into psychological issues.

"If an individual who's being coached and we spot something in the process of the *counselling* that might be 'what's stopping me?' then we'll explore it. Whereas, in counselling sometimes people just cannot work it out because, maybe it's, they've come to you because it's a much more emotional issue. Whereas with coaching it's probably more, maybe it's more task focused. It's perhaps more surface or, you still have to have a deep, a good relationship with them, but perhaps the expectation is that you're not going to be delving in a deep psychological way."

Gwen inadvertently referred to coaching as counselling when describing the difference between working on the surface or exploring deeper issues. As mentioned previously, Gwen was fastidious in contracting and clearly identifying the boundaries with clients. The subliminal word anomaly may indicate that, despite stating that she would re-contract to work with the same client, there may be occasions when the boundary was blurred and deeper issues were examined in coaching. Indeed, Gwen discussed her agreement with one coaching client that they could call her in the evening to discuss issues between meetings. She jokingly referred to herself as 'Auntie Gwen'. She stated that she wouldn't give a counselling client the same access. However, it was apparent that Gwen was aware that she

was providing more than coaching support to the client. It could, therefore, be argued that stating coaching was more task focused was more comfortable for her coaching clients, than acknowledging the coaching process may address some psychological aspects.

5.2.8 Relationship

The relationship superordinate theme included themes of responsibility for confidentiality and consideration of self-disclosure, giving attention to clients and how this could initiate an emotional response and assessing client readiness when facilitating change.

Working in depth may also be influenced by the helping relationship. Joanne considered the way that the client issues were explored within the context of the relationship. She believed that the interpersonal skills that helped form the relationship were core to enabling exploration of the client's issues. Joanne's account again highlights her awareness of the difference between coaching and counselling. Rather than view counselling in a negative way, Joanne values the capacity of counselling and suggests that deeper exploration is often limited within coaching.

"It's the relationship. At the heart of both of them it is how you're working with another human being. And I think there is something about the quality of the skills that are used in order to build a relationship that will impact on the outcomes of both. Because my experience of working with people in a coaching environment is that, if I really listened to what was being said, we always went deeper because there was always so much more that was there. It was this that was my issue, but actually it's got roots which go much deeper. And so I think that there's maybe a spectrum of work around coaching which puts limits around it and at the heart of it is the relationship. And I think counselling allows a much more open approach to be taken which has less restrictions. And I think there are also dynamics which are probably around both as well, the, so when you're listening, what are you listening to in terms of the

language patterns and what's the body language telling you, all those, so much information really. And somehow I feel with coaching you have to perhaps shut down some in order to get to an outcome. That's certainly my experience in the past."

Joanne's excerpt illustrated her awareness of working holistically with her clients. Indeed, her attentiveness also focused on the undercurrents within the coaching relationship, as well as physical representations of how the client was feeling. Joanne referred to the quality of skills used in the supportive relationship. This may refer to Joanne's skills development on her counselling course and how her enhanced knowledge and capabilities have influenced her perceptions of relationships. She strongly emphasised the importance of listening and being willing to help clients explore underlying issues. Joanne expressed disappointment and mild frustration when she again referred to her experience of the closely contained coaching relationship and how clients were not encouraged to explore their issues in organisational settings.

The relationship was also one of the fundamental aspects of the helping intervention for Robert. He highlighted the importance of bracketing assumptions and judgements, using communications skills and providing the holding space to help clients reflect and develop self-awareness.

"For me I think the primary goal would be, is to listen, is to be somebody who has no judgement, who isn't going to tell you what you should or shouldn't do, but just to be, allow that space for somebody to be able to open up and they don't know you, there's no, so it's kind of, you've got that detachment, and therapeutic, to me the therapeutic relationship is everything. Without that it doesn't matter whether you're the greatest therapist in the world or not, if you haven't got the fundamental relationship. So for me it's that space, it's creating that space and creating that therapeutic relationship with that person and then from there I think that's

where it all really happens and, it's empowering the other, I think it's about empowering the person as well."

Robert rapidly processed his thoughts and struggled to put his feelings into words. It was obvious that Robert believed passionately in the significance of the therapeutic relationship. He fleetingly acknowledged the therapist's detachment and therapeutic presence. Robert also stressed the importance of listening with no judgement. Robert strongly believed that providing space for reflection and self-discovery was the most important aspect of a helping intervention, stating 'that's where it all really happens'. He enjoyed being a part of a therapeutic relationship which provided space that solely focused on the client and may not be available in any other area of the clients' life.

5.2.8.1 Roles and responsibilities

Andrea suggested that the space created within the helping relationship needed to promote a feeling of confidence and trust, so that the client would feel able to share their thoughts and feelings. However, she also stated that it was important for practitioners to recognise when the relationship wasn't working and the client was experiencing discomfort and, therefore, unlikely to achieve their desired goals.

"I think you have to work, you have to create an environment in which they're prepared to give you that, which they feel comfortable in that space. And I think you also need to be able to recognise actually when that space isn't working."

Andrea adopted a pragmatic view of acknowledging when relationships were not working. She discussed her personal discomfort and the awkwardness of the client when supportive relationships could not be established. Andrea suggested that, due to personality characteristics or ways of working, clients may not engage with their coach. As a result, it was not possible to build the trust and rapport necessary to facilitate exploration. Andrea explained that she had acknowledged this situation

when working with clients in the past and suggested they may be more comfortable working with another coach.

Additionally, Andrea discussed the vulnerability of the client when reflecting on personal behaviours and emotional issues which may impede their progress towards their goals. Andrea considered the responsibility of practitioners to hold the client and value the trust that had been given.

“I think when you’re coaching someone, it’s a huge responsibility, a huge responsibility, I think it really is. And people give you so much stuff it’s quite privileged, because the things that people say to me in coaching, I’m like, blimey. You’re really giving, and people that you think, oh, they’re not going to say very much, but actually they come in and they give you this stuff, and so you do have this responsibility to take that and work with it in the best possible way, because they’re opening themselves up to you in a way that you don’t often find, particularly in that organisational context.”

Andrea’s repeated emphasis on the weight of responsibility was interpreted as her awareness of the vulnerability of the clients. Having exposed their psychological issues, Andrea questioned whether she had appropriate abilities to adequately support them. Whilst Andrea explained that she had experienced counselling as a client, she acknowledged that she had not received counselling training. Andrea felt that her personal experience of therapy, coupled with her psychological knowledge, equipped her to manage personal disclosures and emotional situations. Whilst Andrea felt honoured that clients had invested their trust in her, her narrative suggested that she also felt vulnerable.

Jenny also discussed maintaining trust and confidentiality within a business context. She discussed working intuitively within organisations.

“I work an awful lot on intuition, which isn’t tangible. And I think part of the problem, particularly if you’re coaching in the business, is the tangible stuff. And I think that’s what’s very depressing with more

and more of those businesses that are training internal coaches, it's cheaper. And then not actually getting what they got from externals, but it is cheaper. So they don't get the anonymity and all the rest of that stuff, and they don't get the stuff that... There's not a single one of the people that I've coached in business who would have told at least a quarter, if not a half, of what they've told me to somebody in the workplace."

Jenny was a qualified counsellor and had gained her coaching skills from a number of roles in different professions. She stated that she was not an executive coach, as she did not feel she had appropriate knowledge of business or finance, but had worked with executives in the past. Jenny drew on her tacit knowledge to inform her practice. However, organisations' preference for qualified practitioners and evidence of effectiveness was having a negative impact on Jenny's ability to attain contracts as an external coach. In addition, organisations were investing in their own internal coaches, which further affected Jenny's work opportunities. She felt the benefits of an experienced external coach were underestimated. Jenny focused on how her therapeutic skills had reinforced her coaching abilities and utilised her capabilities in practice. Whilst internal coaches may be more cost effective, Jenny felt she helped clients in a deeper and more substantial way, by providing a confidential and supportive relationship.

Olivia considered the role of the practitioner's self in creating the therapeutic relationship. Olivia felt strongly that self-disclosure was different between coaching and counselling. She recalled that when she had initially started coaching she had found it difficult to share details of her personal life with her coaching clients.

"When I first moved from counselling to coaching, the thing I found most difficult during training was at lunchtime somebody would ask me a question about myself, and I'd think wait, I can't answer this question, I need to process this. And I think people think you're

nuts, it's just small talk, you do, and so it never is small talk in that I, whenever anyone asks me, I process it very quickly, what can I answer about this? What do I want them to know about me? But I think developing relationships with business people, I will self disclose a little bit, if they ask me a question. I will process it and then, give them an answer I wouldn't give them in counselling, because I'm developing a different kind of relationship with them."

Olivia explained that she had transitioned from counselling to training and then to coaching. She no longer practised as a counsellor, but felt her counselling knowledge and abilities were valued by her employers. Olivia was mindful of working ethically and stated that she continued to question how much of her self she was willing to share in coaching relationships. Olivia shared her awareness of being vigilant in monitoring her personal boundaries in coaching situations. She believed she would always be wary of self disclosure in coaching, despite the different relationship dynamic.

Gwen also reflected on the impact of self-disclosure and how sharing personal history may affect the helping relationship. Gwen demonstrated a phenomenological awareness of the power of words. She was mindful of only using the words that the client had used rather than feeding back her own interpretation. Gwen felt that words used incorrectly had the potential to do harm and influence the way an individual interpreted or viewed a situation. As well as sharing details of the practitioners' personal history, Gwen's reference to contamination within counselling was also underpinned by the use of the words the counsellor may use.

"I think it's also that in counselling you don't want to contaminate what's going on and, because in the way in which you behave does affect how the person is going to open up to you. And a lot of people say to me 'you know more about me than anybody else', and they'll just tell me their complete life history and be emotional, crying, whatever it might be, and I've probably hardly said anything. Whereas with coaching you would, if people needed to cry and

they'd tell you they need to, but you're not talking so much about personal history."

Gwen showed that she was comfortable sitting with the clients' emotions in counselling and coaching. Confidence in the helping relationship was demonstrated by her clients' willingness to share thoughts and feelings that they had not previously expressed in business, or with partners.

5.2.8.2 Connecting and giving attention

Clients sharing personal information in an organisational context had a profound affect on Joanne. She recalled an experience with an executive client who became emotional when given the space and opportunity to be heard during a coaching session.

"I remember working with somebody who was a senior manager and he was desperately unhappy. I managed an HR team, arrived, I think he had just made an appointment to see me which wasn't unusual. And when he came and I simply said words like how can I help you? He just started to cry. And he was very embarrassed about crying because he was a male senior manager in a pretty tough old culture. So I just probably gave him space and just listened and he spoke. And then afterwards we unravelled a little bit of what was going on and I think he could, he could just share all the stuff that had built up. And then he came back to me and said 'I really want to thank you for listening to me and I felt that you cared.' And I, my experience of working in this organisation is that people don't care. And so I was just aware and then that wasn't the only, there were a number. I think one of the reasons as well why I arrived in counselling is a lot of people would come to talk to me about different things and they'd end up in tears very early on. So, and I had not really said anything. I hadn't really touched a nerve or, and I thought there is something happening here and I need to be aware that I'm doing something as well. And I suppose it made me quite sad really to think of how many people are just zipping

themselves up and carrying on where actually they're not, on the inside they're really not coping.”

This lengthy extract illustrates several complex factors that affected Joanne's phenomenological experience. Joanne explained that she had not expected the spontaneous emotional response to being given the space to talk and be heard. She felt that the client was embarrassed by his display of emotion, which was not in keeping with the stoic masculine business culture. Her use of the word *stuff* may be interpreted in two ways. Primarily, 'stuff' may refer to the emotional baggage the client was carrying. Alternatively, 'stuff' may imply the way that feelings are 'stuffed down' and concealed. Joanne became aware that listening, demonstrating empathy and giving somebody her time was interpreted by the client as caring. The hesitation evident in her narrative, as she recalled other coaching clients who exhibited similar reactions, belied her own emotional response and compassion for their situations. Joanne explicitly referred to her own emotional reaction and remembered feeling sad. Joanne indicated that she felt that many clients were containing but not coping, indicating underlying stress or mental health problems. Joanne explained that these experiences had led to her decision to seek counselling training. She hoped her training would help her gain a deeper understanding of her role in the interaction and how to work with clients effectively, with appropriate knowledge and skills.

As an independent occupational psychologist, Andrea has provided coaching and training in many organisations. Andrea explained that her clients often struggled to contain their emotions when reflecting on their problems.

“People usually apologise for crying, and I always say there's no need to apologise, it's a perfectly natural thing to do. And I think they think because they're in coaching, they shouldn't cry, whereas, if they were in counselling, the box of tissues is usually somewhere. In coaching, people say, oh I shouldn't be crying. It's fine to cry.

It's OK to cry. Cry as much as you like. So in almost a way I think that that helps people to, I think people are quite, they probably don't cry enough, and actually if they sit there and they cry, I think well they just let something out. And that whole thing about, we're in the workplace, we don't display emotion, I think is a very powerful message that we get that it's weak to cry or it's this, wrong to cry, or I'm slightly batty if I cry at work or whatever, people have all these weird messages about what displaying emotion at work means."

Andrea also demonstrates that she is comfortable sitting with clients' emotions and managing clients' expectations of appropriate behaviour within the business culture. Andrea offered her clients acceptance of their emotional reactions and gave permission for them to express themselves. It appeared that her clients apologised, feeling that it was not acceptable to cry in a business environment. An alternative interpretation could be that her clients may expect their coach to be uncomfortable with displays of emotion. Andrea expressed her personal judgement that people don't cry enough and that expressing emotions helped to relieve stress and tension. She referred to pervasive expectations of appropriate behaviour and an aversion within the workplace to be seen as vulnerable or weak.

5.2.8.3 Facilitating change

Identifying emotional and cognitive blocks can be an important part of facilitating change. Gwen describes counselling as meeting the client's self defined needs and finding acceptance. Gwen's core value of professional practice and respecting professional principles is challenged in her account of offering advice to counselling clients. Her explanation acknowledges her discomfort at giving advice to clients, although they may specifically request guidance and support. Facilitating change is most commonly associated with coaching. However, Gwen argued that facilitating change was an integral part on both counselling and coaching approaches.

“The primary goal of counselling is, I think, is about helping the person to facilitate a change and help them in the way that they need to develop themselves or accept what's happening. So the outcomes are very similar, but probably less quantifiable, less measurable. But it is helping. It's as much about supportive helping, much more emotional I think than practical. But then I, you do give people practical help because sometimes people want it. In terms of counselling, you're not supposed to give advice but sometimes people ask it, for it and you try and help them to think it through for themselves, but sometimes they just want some advice like where do I go to? What? Where? So you kind of, or what book shall I read?”

As Gwen was explaining her perspective and hearing her own words, she questioned her own prepositions and assumptions. Whilst it may not be immediately apparent from the excerpt, Gwen's manner when explaining the practical help provided in counselling bordered on apologetic. Providing materials and advice appeared to conflict with Gwen's concept of counselling support, whilst Gwen had previously stated her belief in clear contracts and boundaries between coaching and counselling practices. She had then shared her account of providing psychological support to a valued coaching client. Gwen's account of providing practical support to counselling clients was interpreted as beginning to unconsciously incorporate coaching aspects in her counselling practice.

Bethany, an experienced coach, had recently completed counselling training. She felt that the objective of facilitating growth, self awareness and development was the same for both approaches.

“I think it's exactly the same thing. I've been thinking about it a lot, it's a very hot topic at the moment, and I still think it's the same thing. I've only just realised that there are some clients I find really difficult to work with and it's because they don't want to change, and I find that really hard. So for me again, it's still, even if it's just a

change in perspective, or an acceptance, or something, something has to shift. So it doesn't have to be big, grandiose actions, it can just be something small in a, 'oh, I hadn't thought of it like that, well, now I understand', or 'I just feel better having a place to talk', just something has to change."

Whereas coaching clients may be accountable for motivation to change and achieving goals, Bethany was challenged by counselling clients who initially did not have the resources or impetus to change. It appeared that she was looking for some indication that the intervention had been beneficial. This echoed the experience of Joanne, who was in the process of counselling training and expressed her perception of finding it challenging to identify whether her counselling support had made a difference without tangible feedback.

Bethany felt that, whilst change could occur with both approaches, there was a different expectation of the amount of change that could be achieved. She spoke about people as though they were broken and could be fixed.

"With coaching there is almost a recognition that people can be fixed in some way, and there are deficits in us all and we can develop enough that you somehow become this shinier human being. Whereas I think with counselling there is a recognition. At one level it can almost seem a bit dispiriting but that you can't, you can't fix people and that there are lots of things which are simply unknown and will always be unknown. And there's something about living with that element of uncertainty."

Bethany's excerpt illustrates her dissonance with feeling that she could help people as a coach, but can not control the process of helping a person in counselling. Bethany was challenged by not being able to control the process and 'make it better'. She described this as 'dispiriting'

and acknowledged that she was trying accept the concept of not knowing and trusting the client to identify when they would be ready to change.

Susan described how developing self awareness had helped her to feel comfortable with sitting with whatever issues arose in a session with clients. She reflected on how some clients are too fragile or vulnerable to be challenged with achieving additional goals in coaching. She felt that her experience as a psychotherapist and her knowledge of psychology had helped her to identify when some clients weren't ready for change.

“There is a continuum, and at this end are the really mad, disturbed, damaged people. They don't need a coach. It would be hopeless. I don't know if that's heresy, but that's what I believe. No, I have to say very much with you on that. And that's one of my big concerns, that there are an awful lot of coaches that don't recognise it. Well unless you have the training you can't.”

Susan lays heavy emphasis on the level of distress clients may exhibit. From her personal experience, she believed that, when a client lacked resources and had psychological problems, achieving goals was not possible. She felt that many coaches did not have the knowledge or training to identify distress or appreciate that a coaching intervention may not be appropriate with vulnerable clients. Susan expanded on this point during the interview. She explained that she had supervised many coaches who had recently completed coaching courses. Whilst the coaches had gained skills and techniques (Susan referred to these as 'a toolbox or bag of tricks'), she felt they had not developed sufficient self-awareness nor awareness of how their interventions may affect the client. She described discussions with new coaches had been unable to develop effective supportive relationships and were confused as to why their clients did not engage in the coaching process. Rather than specific skills, Susan viewed authentic human engagement and psychological understanding as being at the core of supportive helping relationships. Based on her experience, Susan concluded that coaches who had

recently completed coaching courses needed additional support in supervision for their continued personal development.

5.2.9 Knowledge

The *Knowledge* superordinate theme was underpinned by the themes of experience and intuition, training, the confidence that psychological knowledge provided and awareness of competence. The wealth of knowledge that practitioners bring to the helping approaches, in particular the breadth of counselling approaches, was also discussed by Robert and Audrey.

5.2.9.1 Experience and training

Being aware of knowledge and understanding was highlighted by Olivia. She expressed the concerns and reservations that many counsellors have about coaches who engage in matters that they do not have the knowledge to manage with clients. Olivia suggested that coaches without a psychological understanding or counselling training may be better suited to working with shallow or surface issues. She expressed concerns about endeavouring to work with deeper problems and how these may be detrimental to the practitioner, as they may not have strategies for support or to help them manage their personal boundaries.

“If they’ve had no counselling background they just need to stick to quite superficial coaching, and that’s the safest way. Don’t go digging where you’ve got no experience to help because otherwise you’ll get involved in the wrong things, you’ll get worried about stuff, you’ll go away and not be able to let it go, you’ll carry your, all your clients in your head with you and you won’t go to sleep at night, I think.”

Olivia’s concern that coaches carry the impact from difficult interventions reflects the sentiment expressed by Joanne earlier. Olivia was concerned that coaches who became embroiled in matters that they didn’t have the skills or ability to manage may not have a means of support for discussing their discomfort or managing the impact. Christine, an experienced

counsellor who was working with the personal consultancy model of integrating coaching and counselling, also talked about not knowing what you don't know and unconscious incompetence.

"I've been doing it quite a long time, as well. And I know you can flip, I am very aware, because I did training. Training as well, but I know you can flip into unconscious incompetence, start there and do the whole circle, and end up back there if you're not careful. But I think there is something about having confidence in yourself and in what you're doing as well. Because I definitely, I'm not the same now as I was at the beginning, I can remember a lot of anxiety and looking at a client thinking 'God, what the hell do I say in response to that?' Whereas now I'd be quite happy to just sit there in silence and see what happens, and so there's that sort of confidence that builds with experience, I think."

Christine's account shows that, in spite of training, a lack of experience can sometimes lead people to approach situations that they may not have the abilities to cope with. I interpreted Christine's phrase 'start there and do the whole circle, and end up back there if you're not careful' as a reference to the numerous workshops and training courses she had attended. I concluded that Christine meant that, after each new skill or approach had been learnt, there was the potential to feel more competent in the modality than was realistic. Christine described the unease of not knowing whether this feeling had been represented in the accounts of Bethany and Joanne previously, when relating their experiences of becoming a counsellor. Christine described how gaining experience had given stability to her practice and a reassurance in her own skills and abilities.

5.2.9.2 Competence

Andrea described being concerned about working within her competence and abilities. She demonstrated awareness of the potential implications of

a breach of ethics and how this could impact on both the client and herself.

“I think probably there are times where I am kind of walking a bit of a tightrope and therefore I am extraordinarily mindful that, actually, where does my capability end? And where does someone then become vulnerable? Because that’s a) unethical and b) just horrible for the client and, actually, horrible for me.”

Andrea had previously described working with her client’s emotions and encouraging emotional expression. She had described the responsibility that came with holding the space and respecting the trust clients had in her. In this excerpt, Andrea demonstrated her awareness of her limitations and capabilities. Andrea explicitly discussed vulnerability. Whilst Andrea appeared to be referring to the client’s vulnerability and working ethically, her expression could also be interpreted as referring to her own vulnerability and how unpleasant that felt.

Awareness of a lack of training and counselling abilities was a persistent topic throughout Heather’s account. During the interview, Heather ruefully reflected on not receiving counselling or psychotherapy training three times.

“And so sort of discovered different things about therapeutic interventions, and all the time actually thinking, I should’ve trained as a therapist. But I’ve got to an age now where it would just be, ‘What, more?’ So I just, I think, mostly satisfied with my coaching.”

Whilst Heather claimed to be ‘mostly satisfied with coaching’, her repeated regret and her preference for working in the deep end, or ‘with the sticky stuff’, would appear to suggest otherwise. During the interview, Heather also discussed her ‘love’ of delivering counselling skills training as part of her adult learning role and how much she relished engagement in gestalt psychotherapy (although it was felt to be exhausting). It could, therefore, be suggested that Heather may have unconsciously chosen to adopt a

deep, holistic approach to coaching to satisfy an unfulfilled desire to be a therapist. Following this explanation, we discussed the possibility of Heather becoming a psychotherapist in the future. However, Heather felt that she was comfortable in her current role and it was 'too late'. In addition, she felt that the therapy she would be obliged to engage in would be too disruptive to her relationships.

Robert voiced concerns about the short courses that can be found on the Internet for both counselling and coaching. He appeared irritated that people could call themselves a counsellor after only five days' training, when he had undertaken exhaustive training, engaged in personal counselling and had supervision for years, at great cost. He questioned how these courses would impact on public perceptions of helping approaches and voiced his concerns for client safety.

"You can still do courses which claim, short-term courses over a few weekends or whatever, and then claim to be a counsellor, which has, for me, all sorts of ethical issues around it. Yeah, especially when I know how much training and how much cost and everything else and you think, well hang on, there's a reason for this, and so for somebody to then be able to say, call themselves a counsellor after a few weekends training, I find that quite worrying. And there's also a worry that actually there's nothing to stop anybody calling themselves a counsellor. And equally the same with coaching and actually, I think... coaching you can do in even less time and technically then call yourself a coach. And, I mean, one of the things that has sprung up a lot is life coaches and I wonder actually, what's involved and I am sure there are some very legitimate courses and training out there and I'm sure it's actually quite in depth and quite long. But I'm also aware that there are those that actually... Who's accrediting these?"

Robert refers to the unprotected titles of 'counsellor' and 'coach'. He identifies that, with scant training, anybody could refer to themselves as a

counsellor or a coach. He questioned the emergence of life coaching courses, then tried to counter his exasperation by rationalising their credibility. Robert's frustration was evident as he discussed the variety of training courses. He described how his transition from working in business to becoming a counsellor had required a great deal of personal and monetary investment. Robert believed that his training and the cost involved was worthwhile and that developing skills, knowledge, practice experience and personal development were necessary to work effectively.

5.2.9.3 Psychological content

To gain further knowledge and add depth to her understanding, Helen had chosen to study for an undergraduate degree in psychology. She felt that being able to discuss psychological concepts added credibility and gave her confidence.

"I'm doing the psychology degree as well, it's not required, but I just feel like it adds that extra bit of expertise, knowledge and I feel I can hold a conversation better, because I have that more in-depth understanding of psychology. That becomes my foundation for why I've added counselling and coaching on top of it, as how I earn my bread-and-butter, but it all comes from a very legitimate recognised science. And I don't think there's anything wrong with people who don't have the psychology degree and call themselves a counsellor or a coach, absolutely fair play to them, but for me it's something that I need, for myself to know, that I've got that in my background."

Helen was enthusiastic about establishing a practice which incorporated coaching, life coaching, counselling and was based on a firm foundation of psychological knowledge. Helen had completed a performance coaching course and NLP counselling course; however, she felt that she needed psychological knowledge to develop her understanding human behaviour. Helen believed that being able to demonstrate that she had a qualification in psychology would enhance clients' confidence in her ability to work with them effectively.

This perception was supported by Andrea's experience of coaching. Andrea explained that she had been coached by coaches who were psychologists and coaches who had no counselling background. She expressed frustration at the coaches who adopted a 'toolkit approach', feeling that they did not demonstrate an in-depth understanding and were simply 'going through the motions'.

"I've been coached by people who have really kind of, who are psychologists or who have a counselling background, who I think are much better equipped to deal with you as a whole person rather than, I'm going to open my little box of tricks and see what's in here that I think might work for the situation."

Andrea's experience illustrates Susan's belief that some coaches who had completed coaching skills courses operated on a superficial level. As mentioned previously, Susan felt that supervision may offer the support and learning environment for coaches who did not have any psychological background or counselling knowledge. As a supervisor, she believed she was able to help coaches, who did not have any counselling or mental health training, learn how to spot potential difficulties.

"A supervisee will come and they'll say I come to you because I know you've got a background in psychotherapy and mental health and you can help me spot things, and I do that, and I think it's a great offering I can make. And, so they learnt with me, you know, more about that, what to look out for. Uh, because they know they don't know these things. So to be the coach who knows they don't know, is more valuable than somebody who thinks they know."

Susan appeared to take pleasure in using her experience and knowledge to help others. Susan made it an important observation about having the self-awareness and humility to accept that coaches sometimes don't know. This was seen as more valuable than exceeding their competencies when working with clients.

5.2.10 Self awareness

The *self awareness* super ordinate theme was informed by subordinate themes of engagement awareness of personal boundaries, hindsight and reflecting on practice, and utilising supervision for support and growth. Self awareness was seen as fundamental to practising as both a coach and a counsellor. Rachael pertinently asked:

“How can you facilitate anyone if you don't have any self-awareness yourself? I mean, that goes without saying, I think.”

To Rachel, who presented herself as reflexive and reflective, self-awareness was crucial. Rachael explained that reflecting on practice had occasionally led her to have doubts about her role in interventions that had elicited negative reactions from her clients.

5.2.10.1 *Doubt and engagement*

Self awareness also encompassed awareness of personal boundaries when working with clients. When Clare, who is an experienced coach and an experienced counsellor, contemplated whether she would share any of her personal history with a coaching client, she responded that she would not feel comfortable sharing information about herself.

“I don't think I would do that... Why wouldn't I do that? That's interesting. I don't think I would do that... Maybe that's in some way about protecting me... So that I know where I am in a sense as well... I think it might be, actually.”

As mentioned previously, Clare alluded to encroaching on personal boundaries several times during our conversation. It would appear that, prior to the interview, Clare was unaware that protecting her self was an important factor in her interactions with her clients. Claire shared her personal history. She explained that her life may be viewed unfavourably by clients and, as a consequence, she feared judgement from others. She discussed meeting a counselling client in a social situation and described

the discomfort she had felt when not being able to maintain her professional and personal boundaries.

5.2.10.2 *Reflecting on practice*

With hindsight, Rachael reflected on her practice and explained there were times, when working with clients, she had been so immersed in the process and management of the work that she had not realised that her work had crossed the boundary until reflecting subsequently.

“It’s only after the event that you can kind of reflect and say ‘Oooh, there was a bit of a line there, wasn’t there?’ Um, but while you’re actually in it it’s very hard.”

Rachael worked with animals in her practice and acknowledged that she often found it difficult to identify where the boundaries lay between therapy and coaching. Rachael recalled that, on one occasion, she had unconsciously pursued an issue with a coaching client that they had interpreted as psychologically challenging. Rachael’s attention had been split between monitoring the animal and client engagement. As a consequence, Rachel was surprised by the client’s resistant reaction. She had discussed the incident in supervision. From reflecting on the occurrence, Rachel became aware of her role in instigating the client’s discomfort.

Amanda also referred to reflecting with hindsight. As mentioned previously, during the interview Amanda self-identified a rescuer tendency to try to help coaching clients with her counselling skills. She was concerned that acting instinctively, rather than taking time to reflect, may have affected her interactions with her clients.

“I would never want to do any harm and I’m very clear about that, but it’s like sometimes with the benefit of hindsight you see things very differently to the way that you see them in the moment and you can’t predict how somebody receives something you say. You can say it with the best of intent and it can work brilliantly, and thankfully

it does, but I'm also aware that it can go the other way and people don't hear it the way you perhaps hope they would."

Amanda expanded on her explanation and described her experience of working with one client. She explained that during their coaching interventions she had identified significant psychological issues and explored the underlying causes with the client. In retrospect, Amanda reflected on the position of the organisation with whom she had a contract. The organisation did not support counselling and Amanda was aware of the potential implications of working outside of the contractual agreement.

5.2.10.3 Support

Each of the participants in the research mentioned that they were currently in supervision. Counsellors are required to maintain regular supervision; for coaches, however, supervision as a means of support is a recommendation. Susan felt disappointed that coaches didn't take advantage of the benefits of supervision, instead believing that it was a means of monitoring and regulating practice, rather than an opportunity to grow and learn.

"A lot of coaches, they won't even come near supervision, because they're afraid of being seen. And it's such a shame, because once, and I've done a lot, a fair number of demonstrations of supervision in groups, you know, in workshops. And they say 'oh, that's what it is, I want it!' Because it's an opportunity."

Ruth, who also works as a supervisor to counsellors and coaches, echoed Susan's belief that supervision presented a valuable learning environment, which allowed practitioners to learn on many levels.

"To learn from what we do and to learn, I was going to say how to do it better, but how to, how to learn from not knowing, how to learn from clients."

Ruth emphasised the importance of learning from practice. She discussed the limited number of assessments on coaching courses which entailed observing coaching practice, rather than theoretical concepts or frameworks. Ruth felt that, as coaching was client focused, evaluation of practice was essential. In addition, Ruth highlighted the benefits of learning from social interactions. She believed that supervision could help coaches reflect and become aware of learning opportunities.

However, Olivia and Amanda expressed concerns about finding suitable supervisors who had adequate knowledge of both counselling and coaching approaches and could appreciate the ethical dilemmas and working contexts of coaching and counselling. Olivia described her experience of working with more than one person in an organisation and needing to hold confidences for all of them. Olivia felt exasperated and misunderstood when trying to find a supportive supervisor who could appreciate the different contexts and expectations of the helping approaches.

“I had a supervisor very briefly who didn’t understand and thought I was being unethical, and really challenged me because I was working with a manager and the person the manager worked for and hearing two sides and being able to hold them, and she felt that there was a real conflict and I wasn’t being ethical and I just changed, and I tried three times and changed supervisors because I thought, you just don’t understand. The corporate world is very different from counselling in that way, you have to hold things differently. And I think that does make you question what you’re doing, but that’s what you’ve got supervision for.”

Olivia shared her experience of discussing the ethical position of being a coach to many people within one organisation during supervision. Olivia explained that her supervisor was a psychotherapist and viewed developing relationships with many clients as unethical. The supervisor felt that, by working with more than one client in the organisation, Olivia risked

introducing a conflict of interest. Olivia explained to her supervisor that having multiple clients in coaching was commonplace and entailed mindfully holding the confidences of each client. Whilst this was challenging, Olivia felt coaching sessions addressed less emotional and psychological content than counselling. Therefore, the same ethical principal was different in coaching due to the context. Unfortunately, Olivia's first three supervisors did not agree.

Amanda voiced concerns about finding a supervisor who matched her therapeutic model and was familiar with the counselling frameworks that she used in coaching practice. Amanda adopted a transpersonal integrative approach and found the more structured, cognitive approach offered by some coaching supervisors didn't fit with her practice.

"There's lots of coaching supervisors around but quite honestly the ones that I've met, I wouldn't want to go to. I don't rate them, I think, there's one in particular who often tries to get me to go and it's all very transactional, very heady and very much about her making lots of money and I'm not at all interested. So having access to good-quality coaching supervision and knowing where to go to find people would be really helpful and maybe it's out there already and I just don't know, but that would be something that would be fantastic."

Amanda considered the commercial ethos of coaching and felt that some coaching supervisors viewed the support provided as a business transaction. Amanda believed that professional bodies had a role in helping practitioners locate appropriate supervision that matched the coach's or counsellor's skills and helping approach. Whilst Ruth was supportive of the benefits of supervision, she was equally critical of the current plans by professional coaching bodies to implement a similar supervision model to counselling

“I think there should be supervision, I just don’t think the guidelines, that keeps on counting hours, everybody obsessed with counting hours. You could do 50 hours of the same crap work over and over again, but you’ve got 50 hours on your sheet so it’s okay.”

Ruth argued that coaches should not be constrained in the same manner as counsellors. Rather, they should be empowered to seek supervision when they felt support was needed. Ruth believed that a coach could complete many hours of structured performance coaching and wouldn’t need support or supervision. However, Ruth was an experienced coach, counsellor and tutor. She did not stipulate how less experienced coaches would identify the need or how supervision could be utilised for personal development and protecting the self.

5.2.11 Ethics

The ethics superordinate theme reflected practitioners’ apprehension relating to protecting their self and clients. Subordinate themes of ethical guidelines, training regulation, duty of care and public perceptions of coaching and counselling were identified as practitioners’ main concerns.

5.2.11.1 *Need for guidelines*

Whilst Ruth acknowledged that coaching bodies such as the Association of Coaching, EMCC and ICF included ethical principles in their guidelines, the guidelines were not robust and varied between each coaching body. Ruth expressed a need for robust ethical guidelines to help coaching develop as a profession.

“Because what distinguishes a profession from a non-profession is that there are some criteria and there are some guidelines. So that’s really where I’m coming from.”

Becoming a profession was meaningful to Ruth. Throughout the interview, Ruth discussed her desire for coaching to be perceived separately from counselling. She stated that coaching provided a different service. In conversation, Ruth discussed the importance of establishing a separate

profession that represented the unique contribution coaching made to personal development.

Rather than seeking to maintain discreet professions, Amanda felt that it would be beneficial to provide ethical guidelines for blended practice. However, she felt that the rules would not be beneficial as there were too many different contexts and every client was individual. The guidelines would be to protect both practitioners and clients.

“I’d rather have guidelines or guiding principles or ethics where it’s more, it’s there for the holding, but it’s fluid as well, it’s not black and white. Black and white brings out the rebel in me.”

The need for freedom to practice authentically, with the knowledge and capabilities gained from experience, was emphasised by Amanda, Dave and Ruth.

5.2.11.2 *Regulation*

Heather suggested that regulation and an entry-level of training would also be beneficial for both practitioner and clients.

“I’m less bothered about the label. I’m more bothered about people getting the input that they need. And if that means that I as a coach would have to have some regulation, some extra training, if it benefited me and if it benefited my clients, that’s lovely.”

Heather implied that regulation of training would ensure that coaches acquired core skills and would be better equipped to meet the clients’ needs with their knowledge and capabilities. Heather points regarding training could also be linked to Ruth’s earlier comments related to criteria for professional standards. Robert voiced strong views on the need for stronger guidelines and regulation of training to reinforce public confidence.

“For me, I think that’s really important and it is also important that it’s being monitored and people in the professions, whether it’s

coaching, whether it's counselling. If you've gone through the training properly and you've paid for it, and you've got, as I say, done all of that work, then to have people who are doing it who aren't trained or have just done a weekend course really undermines those who are doing it, and undermining both professions and it's not even. It is detrimental to potentially both. So, if you get a bad rap because you've got people out there claiming to be this or that, I think to me it's really important that the training needs to be right. There needs to be stricter guidelines around it, the ethics and boundaries need to be very clear."

Robert referred to 'training properly' and 'training needs to be right' rather than on brief short courses. Robert was proud of his comprehensive training. He also appreciated the benefits of gaining practice experience and receiving supervision. However, he was frustrated that people with minimal training were able to practice as counsellors and coaches. He emphasised how important he felt it was for practitioners to be accountable. Robert felt that unless consistent standards were achieved, the reputations of the helping approaches would be undermined and diminished.

Dave, on the other hand, was dismissive of the need to regulate coaching. He felt that the conversation two people had when coaching would not be harmful and that regulation was just a means of control by professional bodies.

"How much damage can you possibly do? It's two mentally healthy people having a conversation. We could be having it in a pub. We could be doing it in a restaurant. We could be doing it in a park. We could be walking down the street. How can you regulate that? So my concern is overregulation. I can understand why they would want to regulate because that's jobs for the boys, that's, girls, that's what it is. That's what regulation is, a lot of it. Sign up to this and don't call yourself a psychotherapist unless you're paying us £300 a

year or whatever it is. So if they did that then yeah, I'd call myself a philosophical consultant or something else or philosophical counselling that's out there which is, but that, that's the thing with it is that you, there shouldn't be that much risk of harm if it's coaching. Can you do damage to people with coaching? Yeah, of course you can. You could still molest them. You could do whatever other things you could do. Regulation won't stop that."

Dave deliberately underplayed the professional relationship and client expectations when portraying coaching as a regular conversation between two people. Dave appeared incredulous that regulation would be beneficial for practitioners and questioned the motives of professional bodies. He clearly expressed his intention to retain the freedom to work with clients in a way that he felt suited their needs. Dave had previously discussed only working with clients whom he felt he had the ability to help and fitted with his model of working. He was very clear that he worked within his competence. Although he had knowledge of existential and cognitive approaches to helping clients, he did not have any inclination to work with psychological issues. In contrast to Gwen's earlier caution, regarding words used in interactions with clients, Dave felt that a coaching conversation between two people could not be harmful. This supposition implies that Dave viewed his clients as robust and resourceful.

5.2.11.3 *Mental health and duty of care*

The experiences of Joanne, Andrea, Jenny and Olivia have illustrated the concerns practitioners had about the mental health of clients in a coaching context. Their accounts would seem to show that clients within organisations had often sought to conceal their psychological problems, fearing they could be perceived as being weak.

Public perceptions

Robert discussed public perceptions of mental health and argued that counselling is seen negatively, whilst coaching is perceived to be a very positive activity.

“Coaching sounds like you’re actually developing yourself and doing something perhaps. I’m actually, I keep getting ahead of the thing that is coming into my head, that men and I don’t know why I’m getting that, because I’m not normally that gender driven, but I’m wondering from a male perspective coaching is more palatable than counselling because it has, you might do coaching through work mightn’t you? And you go on workshops and things and that’s OK. We understand that and it’s about, as I say self development and progression and, whereas counselling’s saying you’ve got issues and, or what’s wrong.”

As Robert was talking he became aware of how coaching may be perceived by male clients. Robert explained that the descriptors of coaching such as goals, performance, attainment, potential, focused, and dynamic were all associated with sport, growth and development. These positive aspects were associated with strength rather than weakness and, therefore, may appeal to masculine values. He reflected that men would feel comfortable talking to their friends about going for coaching. However, he felt it was unlikely they would tell many people about receiving counselling as this could be perceived as weak.

Jenny shared her experience of working with clients who had come for coaching. Although they would have been resistant to requesting counselling, when they encountered therapeutic aspects in the coaching sessions they were happy to work on their personal issues.

“I think it’s perhaps more acceptable for some people to be having coaching rather than therapy, so they can talk about their coach, but I think it’s interesting. I think there’s sometimes a bit of a shift in that people start to recognise there is a therapeutic element to it, and that that’s fine.”

Jenny’s account would appear to support Robert’s view that people find coaching more acceptable than counselling. Jenny added the insight that

once people have developed trust in a supportive relationship, they are willing to disclose information about themselves and explore personal issues. This transition may occur if the client was already aware of underlying psychological problems. Alternatively, the client may be unaccustomed to sharing their personal problems due to cultural reservations.

Dave felt that the stigma attached to mental health was an artefact of British stoicism. He believed the negative stereotype prevented people from seeking the most appropriate support that would benefit them. He described clients who are so concerned about appearing to need support they would rather pay for their own coaching privately, rather than take advantage of the coaching services within their organisation.

“In America it’s fine. People are more into therapy and it’s more over here that... there’s still a stigma to it. The corporate clients that I see, they will come, they will explicitly say they really want coaching. They’re very keen that it’s absolutely confidential. And they have EAP programmes where they could see a counsellor or they could see a coach. But they’re so paranoid about it that they are not going to go and see their company one at all, so they’ll come and see a private, someone private.”

Dave’s opinion highlighted a possible contradiction in his views. Previously, Dave had asserted that he did not work with psychological issues. However, having acknowledged that his clients were not ‘happy people’, Dave further explains that his corporate clients actively seek to conceal their need for a coaching intervention from their employer. Dave clearly states their need to be assured of confidentiality and their desire to have coaching as opposed to counselling.

Olivia also discussed how mental health is viewed negatively within organisations. She explained that, within some businesses, clients will say that they are stressed because this has connotations of hard work.

However, when seeking coaching services, they request an invoice stating that training has taken place rather than coaching support.

“The best you can do is say you’re suffering from stress because from an HR perspective I think legislatively they have to do something about it, and stress is seen as OK, because it just means you’ve worked very hard and you’re normal. Anything outside stress isn’t OK for most people other than the really enlightened. And even some people don’t want you to put coaching on the invoice, they want you to put one time training occasionally.”

Olivia expanded on her last point. She stated that, in some organisations, coaching was not perceived as being robust enough for masculine egos. Olivia shared that she had been asked to provide mentoring, instead of coaching, as coaching was associated with therapeutic interventions.

Robert explained that, in his practice as a counsellor, he is aware that counselling is negatively perceived. Indeed, the stigma of mental illness is so great that people do not tell their friends or relatives they are receiving counselling support for their issues. He suggested that mental health should be promoted in the same way as positive physical health, as this would be beneficial for all.

“This is where actually the interesting definition again of the words and what’s meant by the word. How people hear the words, as well, can come into it quite a lot. Because I think counselling does have that, as I said before, that must mean there’s something wrong with you. And that’s how other people will have seen it. And it’s amazing how many clients I have and nobody knows that they’re going, even their partner sometimes... I think that’s the society of this country, rather than ‘actually it’s OK to ask for help’. But actually what I’d love to see is how we do, there’s a big thing about physical health, so let’s try and get that on board. That, actually, emotional health is good, too. As, just a part of an ongoing process,

it doesn't need to always be because there's a big crisis or maybe... Let's think about our mental emotional welfare, and actually because that would help, I think, so much, in so many ways. I mean all about the mental health issues and depressions becoming such a big part again in our society, you wonder, well hang on, why is this?"

To help address misconceptions, Helen believed that a public awareness campaign would be beneficial to educate the general public about counselling and coaching approaches. With greater knowledge and understanding, individuals would be able to make informed decisions about appropriate support. Whilst Helen is aware of the 'Time to Think' campaign, she felt that providing information may help to break down the stigma and taboos present in society.

"I feel like there should be an awareness campaign that helps people even understand what counselling and coaching are and why somebody might prefer, need to use them or prefer one to the other. And actually I think, I think that something like that would really help practitioners, because I don't think there's a brilliant understanding or perception of counselling and coaching out there with the general public."

Helen discussed the client's role in choosing the helping approach they preferred. She felt that clients were unaware of what each helping approach provided. Practitioners were also inconsistent in their explanations of the differences between coaching and counselling, which compounded the confusion.

5.3 Discussion

This research explored experiences of working with the boundary between coaching and counselling in practice. In order to reflect the participants' phenomenological experience of practice, each person who took part in the study self defined their identity. This was felt to be important, as identities may be formed from social interactions, social roles and group memberships. The identity a person adopts may act to focus attention on particular aspects in context, and help people to construct meanings and make decisions. The identity directs individuals towards choices that are congruent to their concept of who they are (Oysterman, Elmore & Smith, 2012).

The people who took part in the study defined themselves as counsellors, therapist-coaches, coach-therapists, coaches and an occupational psychologist. The research revealed commonalities and divergences between the helping approaches in several complex areas. In addition, the emergence of an evolving area of practice was explored.

5.3.1 Working with boundaries

The participants in the study adopted different approaches to managing the boundaries between coaching and counselling in practice. Ruth felt that establishing clear contracts, which specified what would be addressed in coaching sessions, enabled her to set expectations and clear limits. Ruth was adamant that it was necessary to define discrete areas of practice. Ruth's position may reflect a defensive relationship in which practitioners seek to reinforce barriers rather than bridge practices (Wenger, 2012). Indeed, I experienced Ruth's explanation of the necessity to maintain separation as defensive. However, it could be argued that clearly defining her position helped to clarify her self concept in helping relationships (Abrams & Hogg, 1988).

Ruth also believed that clearly delineating between coaching and counselling would help coaching achieve a professional status. At the current time, coaching does not meet the necessary criteria to be

accepted as a profession. A profession is defined by specific criteria which include: distinct skills; a minimum period of training to demonstrate proficiency; a sound knowledge base; a code of ethics; formal organisation; accreditation and regulation; and being recognised by society as a distinct profession (Bennett, 2006; Lane, Stelter & Stout Rostron, 2014). However, Ruth also recognised that demonstrating coaching was a discrete area of practice would be problematic. Not only did coaching share many commonalities with counselling, in relation to the interpersonal skills and psychological frameworks used in practice, but various other professions also implemented coaching strategies as part of the service they deliver (ibid.).

Whilst Ruth felt strongly that coaching needed to attain traditional standards to be viewed as a profession, others believed complying with restrictive criteria could be seen as a means to exert power and regulation (Lane, Stelter & Stout-Rostron, 2014). Dave also felt that clear boundaries should be maintained in practice. However, Dave was focused on maintaining autonomy. Dave had created his own brand of coaching and was adamant that he did not wish to be regulated or be constrained by professional criteria.

Dave had a strong sense of self that distinguished him from others in the group. By developing his own brand, Dave saw his self as separate from the wider coaching community and this has played an important part in his decision to act autonomously (Hansmon, 2001). Indeed, it appeared that Dave may have adopted the identity of a coach due to the lack of regulation. He claimed he would define himself by an alternative identity if the coaching discipline enforced restrictions or regulation.

Whilst Dave's decision was to work with firm boundaries that reflected the service he delivered, Clare's rationale related to an existential holistic belief, which incorporated the body, the mind and experiences in social situations (Jarvis, 2012). Clare, who had transitioned from counselling to coaching, explained that she had both counselling clients and coaching

clients, but she would not work with the same client in different modalities. Clare's testimony revealed a deep concern with protecting her self. Clare experienced the boundaries between coaching and counselling physically. Claire described how she felt the dynamic change in the interaction with the client and experienced a sensation similar to the hairs standing up on the back of her neck. During our interview, Clare became aware of needing to protect her self and recognised that the sensation she experienced as dynamic change in the supportive may be related to anxiety.

The opinions and views of others matter to the self. Whether these evaluations are positive and reinforce self worth, or negative and are detrimental to self esteem, they are important to the construction of self (Oysterman and Marcus, 1998). From exploring Clare's autobiographical phenomenological experiences, it appeared that Clare was self protective and wary of the judgement of others. It could, therefore, be argued that Clare's reaction was a physical signal to protect her self concept against the evaluative judgements of others, rather than an awareness of encountering a boundary between helping approaches. Clare's physical response to a threat was interpreted as a threat to her personal boundaries.

Practitioners also described how their experiences of working with emotional distress and psychological problems had affected their perceptions of boundaries between coaching and counselling. Whilst Andrea established boundaries with her clients, she felt that maintaining the boundary was occasionally challenging in practice. She explained that many of her clients had emotional reactions in coaching. Whilst she was comfortable with her clients expressing their emotions, Andrea felt that she utilised her psychological knowledge to identify the boundaries of her coaching practice.

Emily explained that her perceptions of working with the boundaries between coaching and counselling had been challenged. Emily explained

that, although she had previously agreed with theoretical boundaries, she had begun to question whether it was ethical to refer a client to another practitioner after they had invested their trust in the supportive relationship. Emily had subsequently started a postgraduate counselling and psychotherapy course to increase her psychological knowledge and capabilities to support clients.

5.3.2 Re-contracting to meet the clients' needs

To maintain ethical practice, professional guidance has traditionally suggested that if a practitioner identifies their client would benefit from additional support from a coach or counsellor, the client should be advised and referred to the appropriate professional (Summerfield, 2002).

However, it has been widely acknowledged that the boundaries between coaching and counselling can become blurry or fuzzy (Jopling, 2007; Maxwell, 2009; Jinks, 2010), as clients may introduce psychological issues to coaching contexts or demonstrate a readiness to grow and develop in counselling. Some participants that took part in this study explained that, rather than refer at times of need, they had adopted an alternative way of working to support their clients. Importantly, the practitioners who described their holistic approaches to working with clients had experience of counselling practice as well as coaching.

From working in both modalities, practitioners may see themselves from a number of perspectives and, as a result, may have several self concepts. In the same way that there may be multiple self concepts, theorists have suggested that individuals may have several identities (Stryker & Burke, 2000). Their identities and self concepts may be intricately interlinked to form core parts of their self, which help with meaning making and the roles the person plays in social interactions (Oysterman, Elmore and Smith, 2012). Individuals may also seek a balance between the need to be affiliated with either coaching or counselling and a distinctive individual identity (Brewer, 1991). Several of the participants in the study had self-identified themselves as therapist-coaches and coach-therapists,

indicating that social interactions with clients and reflections on practice had affected their perceived identity. These identities had been adopted by practitioners who had chosen to work across boundaries with the same client.

It could be suggested that working across boundaries may be seen as a continuum (Choi & Pak, 2006). Several practitioners in the study had adopted a multidisciplinary approach and had chosen to re-contract between coaching and counselling practice, to support their clients and ensure approaches were kept discrete and boundaries remained intact (Spence, 2012).

Gwen was a counsellor who had transitioned to coaching. Gwen explained that ethical practice was valued and meaningful. She explained that she utilised clear contracts in practice, to establish boundaries with her clients. However, she did not adhere to suggested guidelines. Instead, Gwen described identifying counselling needs in coaching clients and offering to re-contract to provide counselling support. Gwen's phenomenological experience motivated her to reinforce her identity as a respected professional. Gwen, therefore, emphasised the positive aspects of her behaviour and demonstrated her competence and awareness of ethics (Oysterman, Elmore and Smith, 2012; Tennant, 2012).

Jenny and Olivia were experienced counsellors who had transitioned to coaching. Jenny explained how she would predominantly focus on coaching with her clients. She explained that her clients were aware of her therapeutic background and appreciated the therapeutic elements of the coaching process. Jenny shared her experience of re-contracting with her client to provide counselling support. This additional support enabled her client to overcome a deeply rooted psychological block before resuming coaching to achieve her original aim. Jenny discussed the importance of re-contracting to maintain trust in the supportive relationship.

Olivia also focused on coaching and training in her practice. Olivia explained that organisations often sought her services because of her therapeutic background. She felt that organisations recognised that she could provide psychological support, although they did not provide a counselling service for their employees.

Bethany had extensive experience of working as a coach and had recently completed counselling training to provide support to her clients. Bethany was in the process of rationalising how to integrate coaching and counselling in her practice. At the time of her interview, she felt that she would be comfortable re-contracting to offer counselling support according to the clients' needs.

However, when trying to meet the clients' complex needs, it would appear that some practitioners may inadvertently blur the boundary when working with clients. Amanda and Rachel told how they had become aware of blurring the boundary retrospectively. Whilst both practitioners endeavoured to work according to contractual agreements in discrete areas of practice, they acknowledged that, upon occasion, they had 'stepped over the line' to address psychological difficulties in their clients.

Robert worked as a counsellor using a solution focused approach in practice. During the interview, Robert reflected on maintaining boundaries with his clients. Robert discussed times when he was not sure whether he was coaching or counselling his clients, but felt that, as long as you had the skills to help your client, 'what did it matter?'

Working with abilities and within competencies was seen to be important by all practitioners. However, due to the complexity of shared knowledge and shared understandings, competence may not be well-defined where boundaries overlap (Wenger, 2012). Heather acknowledged that, although she was trained as a coach, she taught counselling skills and enjoyed engaging with the deeper psychological aspects during client interactions. Heather stressed that she received support in supervision from a trained

psychotherapist. However, it was evident from her manner and explanation that she was aware of possibly exceeding her capabilities.

5.3.3 Integrative Practice

When endeavouring to work holistically with their clients, it would appear that innovative solutions have emerged. Practitioners described engaging in an emergent practice, which integrated both coaching and counselling, to address issues that required the skills and knowledge of more than one discipline. Practitioners were focused on assisting their clients rather than enforcing socially constructed boundaries (Lattuca, 2003; Collin, 2009). The interdisciplinary practice involved the blurring of boundaries between coaching and counselling and merged knowledge and methodologies from both disciplines to work seamlessly with the client (Spence, 2012). Christine and Sandra described working with an integration framework to help them manage the transitions between helping approaches. Both Christine and Sandra explained that they had worked as integrative counsellors. Consequently, including coaching in their practice had felt like a natural progression. Audrey, on the other hand, explained that she had developed her own integration model. Further, she had also provided training and had a contract to use the model in a healthcare environment.

In a progression from the interdisciplinary practice, one practitioner had adopted a transdisciplinary approach to working with their clients (Spence, 2012). Susan explained that her transdisciplinary practice holistically integrated all of her practitioner skills from counselling and coaching disciplines and incorporated recognition of the clients' spirituality. Susan was a mature practitioner who had extensive experience of many counselling approaches and had integrated coaching into her practice. She discussed building supportive relationships with her clients, which enabled her to use all of her skills and capabilities.

5.3.4 Perceptions of coaching and counselling

Establishing a supportive relationship was seen as fundamental for both coaching and counselling approaches by all practitioners. Robert felt that

the relationship was fundamental to helping his clients change. Indeed, Bethany felt that a strong supportive relationship was beneficial to facilitating growth in both helping approaches. The quality of interpersonal skills was highlighted by Joanne, who discussed the importance of listening and the power of paying attention, demonstrating empathy and providing space for clients.

Many practitioners discussed creating a space for their clients and the trust that was built in the supportive interaction. Jenny explained how working as an external coach enabled her to ensure confidentiality for her clients, which may not be guaranteed by an internal organisational coach. As a result, she felt that her clients had shared more with her. Additionally, Andrea and Robert discussed the responsibilities of holding the client safely in the space provided. Andrea felt this enabled her clients to express their emotions in coaching sessions.

Whilst there were many similarities in the relationships, practitioners also described how they experienced differences in the focus and intent of coaching and counselling relationships. Bethany had recently completed counselling training, but appeared to prefer the more structured coaching relationship with clearly identified objectives and review of effectiveness at the end of the coaching engagement. She found the ambiguous, explorative nature of her counselling relationships more challenging. In particular, she discussed the difference in willingness to change. Bethany described coaching clients as focusing on change and taking action, whereas her counselling clients may not indicate readiness to change for some time.

The concepts of counselling providing space for exploration, and coaching offering containment, was shared by many practitioners. Coaching was seen to be clearly defined by agreed contracts. The coaching process appeared to be experienced as being more controlled and structured. Additionally, a review of the coaching process at the end of the intervention enabled practitioners to have evidence of the effectiveness of

practice. This appeared to be important to Bethany and Joanne, who expressed the need to feel they had made a difference. Without evaluative criteria or established objectives to review, Bethany felt that making a difference was less tangible in counselling and she was unsure as to whether her part in the supportive relationship had been beneficial to her counselling client. Practitioners variously described counselling as expansive, explorative and working at a deeper level with psychological issues. The expansive nature of counselling was felt by many to facilitate development of self awareness in the counselling client.

Practitioner self-disclosure was seen as different between coaching and counselling. Within coaching, self disclosure was seen to enhance the relationship and demonstrate warmth, personal investment and understanding. However, in counselling, participants felt that practitioners needed to manage the amount of self disclosure with clients with care. Sharing too much personal information was believed to put the practitioner at risk and may even unduly influence the client or contaminate their personal reflections.

Concerns about differences in the depth of practitioner self-disclosure, when working across counselling and coaching boundaries in multidisciplinary, interdisciplinary and transdisciplinary practice, were expressed by Ruth and Dave. Ruth felt that it was not possible to self disclose as a coach and then retract the information when working with a client in a counselling frame. The challenge of managing self-disclosure in an integrative helping relationship was also discussed by Sandra. To guide the transition between helping approaches, Sandra had incorporated an integrative framework in her practice. The model helped Sandra conceptualise how to manage changes when moving from working at depth with clients to addressing more action focused goals.

Claire and Olivia spoke about their experiences of managing self-disclosure when working with coaching and counselling clients. Both practitioners were experienced counsellors who had transitioned to

coaching. Whereas many practitioners felt comfortable self-disclosing with coaching clients, to establish trust and rapport, Clare and Olivia were sensitive to disclosing personal information about their self in coaching and counselling interactions. Their motivations to protect their self were personal and based on biographical phenomenological experiences. Olivia and Claire appeared warm and open and did not believe their measured approaches impeded their supportive relationships.

Self-disclosure from the client in coaching relationships had affected Bethany, Joanne and Trudy. Although clear parameters for coaching had been agreed, when provided with space to express themselves in the helping relationship, clients had disclosed psychological problems and distress which Bethany, Joanne and Trudy felt ill-equipped to support. It could be suggested that, at these points of engagement, the practitioners experienced dissonance, as their expectations had been challenged and they were unsure of the appropriate action to take. The disjuncture appeared to perpetrate a need to learn from these situations and created a desire to change (Jarvis, 2006). As a consequence, Joanne, Trudy and Bethany had chosen to develop new skills and knowledge by taking counselling and psychological coaching courses. The learning appeared to have widened their perspectives and transformed their self concept, professional identity and perceptions of the value of their experiences (Jarvis, 2006).

5.3.5 Psychological well-being

Working with emotions and mental health issues was discussed by all practitioners in the study. Dave shared that he was not willing to work with psychological problems in his coaching practice. He felt that practitioners (more particularly, psychotherapists) who were willing to address the issues in their coaching practice 'muddied the waters'. He felt that exploring issues in depth was the practitioners' choice and believed clients did not wish to explore formative or distressing experiences in a coaching context. As the experiences of Bethany, Trudy and Joanne attest, whilst

establishing firm boundaries with clients can set expectations of the issues that will be addressed in practice, the client's personal issues and psychological problems commonly arise in coaching sessions (Maxwell, 2009).

Several practitioners discussed working with clients who had reacted emotionally during coaching sessions at work. Andrea and Gwen talked about clients expressing emotions in organisations. Andrea explained that her clients often felt embarrassed about expressing their emotions and apologised for crying. She felt as though they were seeking permission to cry. Gwen shared that, when her clients became emotional, they would sometimes tell her they were going to cry, almost as a forewarning. Andrea and Gwen felt comfortable managing emotional issues with their clients.

In contrast, when Joanne spoke of her clients who had become distressed, she inferred that she had felt helpless, as she didn't feel she had appropriate skills to support them adequately. Joanne discussed working with men who appeared to be coping on the surface, but were not coping at all. Using a suitcase metaphor, to describe containing and holding in personal problems, appeared to be popular amongst participants. Joanne referred to her clients as zipped-up and packed. Joanne's experience would appear to support the suggestion by Maxwell (2009), that coaching clients may be as emotionally vulnerable as counselling clients but feel unable to openly divulge their problems (Maxwell, 2009). Joanne had subsequently chosen to engage in counselling training and felt that coaches needed to develop a psychological understanding and therapeutic skills to be able to appropriately support clients when issues arose in practice.

Whilst coaches discussed clients showing distress in coaching session, Ruth questioned practitioners' abilities to identify mental health issues and choice of approaches to help clients. Both Robert and Ruth considered the content and rigour of coach and counselling training courses. Indeed, the

majority of participants discussed their concern about the provision of coach training and questioned whether coaches had the necessary skills and abilities to help clients with difficult issues.

Concerns relating to coaches' abilities to recognise mental health problems and manage them effectively have been expressed in Chapters 3 and 4 in this programme of research and previous studies of practitioners' perceptions (Hart, Blattner & Leipsic, 2001; Grant & Zackon, 2004; Turner, 2010; Jinks, 2010). It has been suggested that coaches need to be aware of their own competencies based on their knowledge, training and abilities (Maxwell, 2009). Price (2009) also recommends that coaches need to be mindful of working in the client's best interest and work within their personal boundaries. Whilst executive coaches suggested that standardised training coaching should be less rigorous than counselling training (Turner, 2010), many have argued that psychological knowledge and an awareness of mental health issues should be a core aspect of rigorous coach training (Cavanagh, 2005; Bachkirova, 2007; Maxwell, 2009; Turner, 2010).

Christine acknowledged that when she was newly trained, she 'didn't know what she didn't know' and it was possible to not know the limits of your competence. Indeed, practitioners who are new to a profession bring their prior experience with them. However, their tacit knowledge may not reflect the competence of the new professional community. Therefore, learning within their new role may follow a process of readjustment and repositioning (Wenger, 2012).

The need for practitioners to work within their competences and to maintain professionalism was also emphasised by Ruth and Gwen. Robert expressed frustration at practitioners who called themselves counsellors after minimal training. He felt this could negatively affect public perceptions of the quality of helping approaches. Robert also considered the investment he had made in his extensive training and felt that courses

needed to be regulated and standardised to ensure confidence in the quality of service clients could receive

Robert reflected on the interwoven aspects of his counselling training. Robert valued the developmental process of gaining practice experience, developing self awareness in personal therapy and receiving supervision to enhance his personal and professional development. He voiced consternation at the multiplicity of counselling courses that were available on the Internet, which did not demonstrate the same rigour. Robert acknowledged that, as counselling and coaching were not subject to statutory regulation, or recognised professions, they did not have protected professional titles. Therefore, any person could practice as a coach or counsellor with a minimum of training.

In the course of their work, both counsellors and coaches may enter areas in which they have no competence. This may be by choice or lack of learning. Having a clear idea of identity helps practitioners negotiate whether the parameters are something that they are able to address or outside of their skills (Wenger, 2012). Andrea felt that her identity as a psychologist, and her comprehensive knowledge of psychological principles, guided her awareness of her competence and the limits of her practice. Additionally, people may enhance their sense of worth and value from their association with respected groups (Tajfel & Turner, 1986). Helen had chosen to study at university to enhance her understanding and demonstrated an appreciation of the credibility provided by demonstrating psychological knowledge in her integrated practice.

5.3.6 Public perceptions

Public perceptions of the helping approaches were thought to be particularly significant when clients chose a helping approach to meet their self identified needs. Helen queried whether the public understood the differences in the support coaching and counselling could provide. She suggested that, as many experienced practitioners struggled to identify clear and specific differentiation between the approaches, it was likely that

the public would be confused and may base their judgement on unhelpful stereotypes.

Helen felt that informing the public of the support available and what counselling and coaching entails would help individuals make an informed choice. Robert also believed that supporting mental health needed similar resources and public education as government initiatives to enhance physical health and well-being.

Additionally, many of the practitioner accounts have illustrated how psychological issues emerge during coaching sessions at work. Practitioners explained that the employees felt they would be seen as 'weak' if they expressed their emotions or indicated any psychological distress. Olivia stated that clients may, therefore, seek coaching for stress, as stress was associated with working hard, when in reality they needed counselling support. In addition, Olivia noted that some organisations did not openly support their employees with counselling services. She stated she was aware that she had been chosen to coach clients who may have psychological issues due to her therapeutic background. Indeed, it could be suggested that, as both counselling and coaching adopt approaches that support individuals, the public may perceive coaching as an acceptable form of therapy (Williams, 2005).

Dave also discussed his clients who sought to avoid the stigma associated with mental health issues by rejecting the coaching and counselling support offered by their employers. His clients had deliberately sought coaching independently so as not to be seen as weak. In an attempt to address these perceptions, Business in the Community and the Time to Change campaign have recently collaborated to encourage business and organisations to recognise the benefits of supporting employees who experience mental health issues (BITC, 2014; BITC, 2015). The reports demonstrate that many global organisations have joined the initiative and have developed to inform and support their employees. Publicly acknowledging the impact of mental health within organisations and

demonstrating a constructive approach to offering support is positive progress in addressing mental health stigma. However, in light of Dave's account of employees' distrust of the support offered by organisations, employees may not trust or engage with the support programmes offered.

Fear of being perceived to have mental health issues was reflected in Robert's perceptions of coaching and how the terms used to describe the helping approach would appeal to masculine values. Robert shared that his male clients found it difficult to admit that they were receiving counselling, even to family and friends. They viewed having mental health problems as weak, whilst coaching was perceived to be about enhancing performance, development and working with strengths. Research has shown that men are averse to seeking help (Addis & Mallick, 2003; Emslie, Ridge, Ziebland & Hunt, 2006; McKelley & Rochlen, 2007). Therefore, it is possible that their willingness to utilise coaching could be seen as a positive means of providing support.

Evidence from this study suggests that the choices clients make about the supportive service they wish to receive and content they decide to share has a profound impact on boundaries in practice. Indeed, it could be argued that, rather than unsubstantiated theoretical boundaries, parameters of practice are created by a dynamic interplay between practitioner and client personal boundaries. Narrative accounts and self-reported survey data from the second study would suggest practitioners self identify boundaries to practice, based on personal capabilities, personal values and self awareness.

The client appears to play an active role in the co-creation of boundaries. Further, rather than being fixed, the client's boundaries may be malleable within the context of the helping relationship. In coaching, the client may present as being robust. However, within the supportive space, created by the helping relationship, they may consciously or unconsciously change their personal boundaries. Clients may feel secure in the support provided by the practitioner and trust that the practitioner has the capabilities to help

them. As a consequence, the client may risk appearing vulnerable. It would therefore seem imperative that coaches have adequate skills and self awareness to manage boundary transitions.

5.3.7 Supervision and support

The benefits of the personal and professional support offered by regular supervision are widely recognised within counselling. Rachael referred to the benefits of supervision in helping her recognise when she had unconsciously crossed the boundary between coaching and counselling in practice. Further, Amanda had reflected on whether her 'well intended' actions were the most appropriate in the context of coaching with her supervisor. She felt that the ensuing discussion had been beneficial for her professional and personal development.

Previous studies have suggested supervision is beneficial for helping coaches gain awareness of factors that may influence the coaching relationship with the client. Indeed, supervision was seen as central to safe, ethical practice (Turner, 2010). Ruth stated that supervision could be used to reflexively learn from practice and interactions with clients, but had baulked at imposing requirements for the same regularity of supervision as counsellors. She believed that coaches should have the freedom to self identify the need for supervision when necessary or make alternative arrangements with peers or their own coaches for additional support. By seeking flexibility and autonomy, Ruth's views appear to conflict with her desire for coaching to become a regulated profession. Additionally, Ruth's position does not explain how inexperienced coaches would identify their need for personal support or professional development.

Recruitment problems in the first study (see Chapter 3) may indicate new coaches' reluctance to share their insecurities when starting in practice. Individuals self evaluate based on their personal values and beliefs and how they are accepted by others. When reflecting on their actions, they also consider the responses of others. Their perceptions affect self identity and self-esteem (Tennant, 2012). Susan suggested that many new

coaches, who claimed they did not like the concept of supervision, possibly did not know what coaching supervision entailed. Rather than being a means of monitoring or regulating behaviour, as some assumed, supervision could be seen as a means of offering support and providing a learning opportunity. In addition, supervision could help coaches develop self awareness. Self knowledge is essential for personal boundaries in social interactions (Baumeister, 2011). Reflecting on aspects of the self in supervision may, therefore, help an individual to gain an awareness of who they believe they are and how others perceive them (Tennant, 2012).

The challenges for more experienced practitioners may be equally complex. Olivia and Amanda highlighted the difficulties in locating a supervisor who understood the different challenges of working with coaching and counselling or who matched their skills or practice approach. Furthermore, Amanda felt that professional bodies should take a role in helping practitioners locate appropriate supervision. This opinion appeared to add to the view of coaches reported in recent research, which indicated a belief that coaching supervisors should be trained and regulated by professional bodies to ensure consistent support and competency (Turner, 2010).

Finally, it could be argued that, for an organisation to learn, it is dependent on an individual within the organisation having the experience and subsequently instigating a change to the organisation's structure or processes (Jarvis, 2006). The emergent practice that has been instigated by practitioners working across helping disciplines is currently in its infancy and, as such, current ethical guidelines from professional bodies do not address the complexities of merged practice. Practitioners, therefore, stated their desire to receive support and guidance from their professional organisations to support their future development.

5.3.8 Summary

This study has incorporated the idiographic perspectives of 20 practitioners. Whilst this represents a large sample for an interpretive

phenomenological study (Smith and Eatough, 2006), it should be emphasised that it is debatable whether the themes are applicable to the wider population. The purpose of an IPA study is not to generalise the findings, but to develop understanding and identify factors that may inform future strategies and theories.

This study incorporated the opinions of coaches and counsellors to generate an integrated understanding of practitioners' experiences of identifying and managing boundaries between the helping approaches. The idiographic accounts provided rich information about the practitioners' values, beliefs and the meanings they construct from their interactions with clients. The findings build on the outcomes from the two previous studies in the programme of research and provide a greater understanding of issues related to managing the content of supportive relationships, the importance of supervision for support and personal development, competence and training needs, the implications of public perceptions of mental illness, and the need for ethical guidelines for practitioners that blend coaching and counselling approaches in practice.

The final chapter in this thesis will explore the implications of the programme of research. The limitations of the studies will be considered and the unique contribution of the research will be discussed. A model of training requirements across the helping spectrum will be proposed and recommendations for collaboratively developing ethical guidelines, enhancing practitioner personal development and raising public awareness of the aims of helping approaches will be explained. In addition, suggestions for future research will be proposed.

Chapter 6 Summary and Conclusions

6.1 Introduction

This thesis has presented a mixed methods programme of research designed to explore practitioners' perceptions of the boundaries between counselling and coaching. The studies aimed to develop an understanding of the experiences of novice and experienced practitioners and ascertain whether discrete areas of practice could be identified. The findings from this programme of research have shown issues and concerns that arise in the real world of coaching.

6.2 Summary of research

The foci of the research programme have been deliberately broad, to accommodate concepts that emerge from practitioners' reports and experiences. The first study in this body of work aimed to investigate novice and newly trained coaches' perceptions of the similarities and differences between helping approaches and views on identifying and managing boundaries in practice. The novel research provided an appreciation of the views and dilemmas of newly qualified and novice coaches. This valuable information may be utilised to inform strategies to enhance and develop competence in new practitioners. To gain a unique understanding of how practice and perceptions change over time, the second and third studies in this research programme investigated the views of experienced practitioners. In contrast to earlier research, the studies uniquely incorporated the views and experiences of both counselling and coaching practitioners to contribute a greater breadth and depth of understanding.

6.2.1 Study 1 – Perceptions of Novice and Newly Trained Coaches

The first study in this programme of research utilised a mixed methods approach to investigate newly trained coaches' perceptions of the boundaries between coaching and counselling. The research combined a quantitative survey, to gain a broad understanding of novice and newly

trained coaches' perceptions and qualitative interviews to gain a deeper awareness of their opinions and learning experience.

Coaching is currently going through a similar process of demonstrating professionalism as counselling and psychotherapy experienced in the past. Many coaching bodies endeavour to demonstrate the credibility and competence of the profession by accrediting coach training courses. However, there are many models of coaching practice, which draw on skills and knowledge from a diverse range of professions. In addition, the available courses have differing standards of skills and knowledge provision (Lane, Stelter & Stout-Rostron, 2014). Consistency in coach training was raised as an issue by novice and newly trained coaches in the qualitative interviews. The newly trained coaches stated that they had deliberately chosen a university accredited postgraduate coaching course as organisations would recognise the credibility of their training. This was felt to be particularly important as the new coaches hoped that the learning would reinforce their professional identity as a coach.

To enhance their practice further, newly trained coaches emphasised the importance of developing an understanding of psychological knowledge and frameworks to underpin their practice. However, in discussion it became apparent that the intensive delivery of the postgraduate training had not provided enough time or opportunity for new coaches to internalise the concepts and theories. Therefore, when asked to describe the psychological theories they had learnt, the newly trained coaches referred to course handbooks and could not spontaneously recall the psychological knowledge. Jarvis (2006) suggests that it is an oversimplification to believe that theory learnt in a classroom is then readily applied in practice. Instead, learning could be seen to be social and dependent on the interactions amongst learners, as well as provision of theoretical knowledge and support provided by educators (Hansman, 2001). Social learning is situated in the individual's lived world. It would, therefore, seem appropriate to adopt a strategy that reflects an individual's

phenomenology to enhance their understanding and individual learning (Lave, 1991).

To provide learning, with sufficient scope for personal development, it could be argued that new coaches would benefit from gaining experience in situations where they can use their new skills and knowledge and be given the opportunity to process their experience cognitively, emotionally and practically (Jarvis 2006). Learning in communities may help new coaches broker a form of apprenticeship-type way of learning. The community learning could include experienced practitioners managing learning structures which incorporate situated practice. The cognitive apprenticeships could be utilised to develop interpersonal, personal and community processes. As such, experienced practitioners may act as role models to scaffold new coaches' learning and development. In addition, novice members may be provided with the opportunity to observe the performance of experts or experienced practitioners (Lave, 1991; Hansman, 2001; Wenger, 2000). In addition, through discussing experiences, the new coach may generate a greater self awareness, which could be viewed as a secondary learning experience (Jarvis, 2006).

The maturity of the novice and newly trained coaches also appeared to have an impact on how the new coaches engaged with their learning and coaching practice. The novice coaches sought to structure their practice by utilising established frameworks. In addition, novices emphasised the importance of gaining new knowledge and skills. However, novice coaches showed less self awareness and were not able to draw on previous experience to contextualise their understanding. Indeed, novice coaches appeared to demonstrate interpersonal and institutional aspects of self development (Kegan, 1982). The newly trained coaches, in contrast, referred to previous experience in other occupations and indicated that they had discussed their practice dilemmas in supervision as part of their coach training.

When considering the boundaries between coaching and counselling, in both the survey and interview, novice and newly trained coaches initially focused on the similarities of the helping approaches. Indeed, whilst novice and newly trained coaches reported stereotypical descriptions of counsellors and coaches, the participants appeared to find it difficult to identify differences between the helping approaches.

Confusion and inconsistency were apparent throughout the findings. Indeed, results from the survey demonstrated that new coaches would be willing to exceed their competencies to help clients with psychological problems. These outcomes were reinforced by the testimonies of the novice and newly trained coaches. Whilst novice and newly trained coaches initially indicated that they were aware of boundaries between helping approaches, they then discussed working with emotional and psychological difficulties in practice. Initially, these findings were interpreted as possible unconscious incompetence due to the new coaches' inability to identify the limits of their competences. However, when results were subsequently compared to similar findings from previous research (Price, 2009) the results showed marked similarities. Indeed, the comparison appeared to show that both new and experienced coaches were willing to work beyond their capabilities.

It could be argued that new coaches may find it particularly difficult to identify the boundaries between coaching and counselling. People make meanings based on their experience of what has happened in the past and expectations that a similar occurrence will happen again in the future. Through these expectations and assumptions, individuals may develop frames of reference, through which they may form boundary judgements (Scranton and King, 2003). Indeed, novice and newly trained coaches implied that they believed that there were differences and boundaries between the two helping approaches; however, they were fine lines that could easily be crossed. It could also be suggested that, in practice, theoretical boundaries are difficult to define and novice and newly trained

coaches' confusion could be due to the vagueness and inconsistency of boundaries described in theoretical literature (Bachkirova, 2007). As a consequence, novice and newly trained coaches may attempt to use intuition to identify when practice has transitioned from coaching to counselling. However, as intuition is developed from experience of regular or routine actions (Myers, 2002), it is unlikely that novice and newly trained coaches would make consistently effective decisions in practice.

6.2.2 Implications from the first study

The findings from the first study contributes to the body of knowledge and represent the first known investigation of newly trained coaches' perceptions of the boundaries between coaching and counselling. The outcomes indicated several areas of concern that would indicate implications for coaching practice.

It has been argued that research is needed to determine the necessary competencies for coach education and development (Lane, Stelter & Stout-Rostron, 2014). Indeed, the findings from the first study indicated confusion regarding coach training and regulation. Novice and newly trained coaches reported that they believed coach training was regulated by professional bodies. This is a common misconception. As discussed in Chapter 2, each professional body determines their own course content accreditation process. Therefore, the provision of coaching courses is not consistent with training providers. As a consequence, coaches may believe that they are receiving regulated training when a course has been accredited by a professional body. At the current time, university accredited training courses appear to offer the only education that has been independently reviewed. As a consequence, coaches appeared to be seeking qualifications that will be recognised as credible by organisations and may prefer to develop their psychological knowledge and coaching skills in postgraduate qualifications.

Developing psychological knowledge and appropriate counselling skills was indicated as particularly required for new coaches. Participants in

both the qualitative and quantitative studies indicated a willingness to exceed competence in helping clients with psychological and emotional issues. These findings have considerable implications for practice. Working beyond capabilities could be potentially harmful to the client, the coach and professional reputation. It could, therefore, be suggested that, rather than implementing coach training, which is less rigorous than counselling training (Turner, 2010), it would seem more appropriate to develop a comprehensive programme that incorporates personal development, psychological knowledge and therapeutic skills. Whilst this recommendation may meet with considerable resistance from professional coaching bodies, evidence from this study would appear to demonstrate that these requirements are necessary for ethical practice across the helping spectrum.

The first study would also appear to demonstrate that ongoing developmental support would be beneficial to help new coaches enhance their skills and capabilities in practice. It could, therefore, be suggested that training programmes need to include a framework to help practitioners reflect on practice and enhance their personal and professional development. Furthermore, as coaches join the discipline from a multitude of professional backgrounds, with diverse experience and knowledge, it may be beneficial to encourage new coaches to engage in communities of practice (Wenger, 2010). In communities of practice, new coaches could engage in a continual process of development to gain more experience and expertise. Additionally, they would have the opportunity to share their learning and knowledge in a contextual situation with members of the group. The professional community may reflect on different ways of working with clients, developmental histories, skills and knowledge, capabilities and client relationships. As a result, engagement in a community of practice may help new coaches develop critical competence and a professional identity (Wenger, 2000). Further, as the newly trained practitioners gain confidence and demonstrate competence, support could be gradually reduced. Individuals may then become more self-directed in

their learning, adapting their skills and knowledge to different contexts (Hansman, 2001).

6.2.3 Study 2 - Survey of Experienced Coaches and Counsellors

The second study used a survey design to gather a broad range of experienced coaches' and counsellors' perceptions of identifying and managing the boundary in practice. Due to the various entry points to coaching, participants in the study self identified themselves as experienced practitioners. Self identity can be conceptualised as constructed of people's beliefs or knowledge of the occupation they belong to and their feelings about that discipline (Swann & Bosson, 2010). People may join a particular occupation to enhance their self-concept (Abrams & Hogg, 1988). These positive perceptions may lead to a strong in-group bias, with a propensity to promote the values of their esteemed occupation relative to other disciplines (Tajfel, Billig, Bundy & Flament, 1971).

In contrast to the novice coaches in the first study, participants in the second study demonstrated maturity, with only one participant under the age of 35. The coaches and counsellors reported a high level of education, with over half stating that they had achieved accredited qualification for coaching and counselling. When considering the innate social aspect of learning, it can be appreciated that experienced practitioners' abilities and understanding are not solely based on theoretical knowledge. The experienced practitioners also reported various occupations and professions which may have informed their perceptions (Wenger, 2010).

Instead of clarity of boundaries, the results from the second study demonstrated confusion and inconsistency in the perceptions of experienced coaches and counsellors in practice. In contrast to the new coaches, experienced practitioners emphasised the differences between the helping approaches. Although nearly half felt there were more similarities than differences between coaching and counselling, a large majority felt that there were numerous differences between the

approaches. Practitioners may have emphasised the differences to reinforce their professional identity and differentiation from the other helping approach. Interestingly, 62% felt that their training had been sufficient to help them identify the boundary between coaching and counselling in practice; however, 60% felt that they instinctively identified the boundary.

Further inconsistency was evident in experienced practitioners' reports of whether boundaries were clear (60%), easy to recognise (57%) or hard to identify (44%). The results would appear to suggest that identifying differences between coaching and counselling is particularly difficult in practice. Instead of the suggested clear delineation, many practitioners may find it challenging to identify discrete areas of practice. It could be suggested that some practitioners demonstrate pluralistic ignorance in acknowledging boundaries (Thaler & Sunstein, 2008). They may not believe that the theoretical boundaries exist in practice but claim that they do, as they believe others within the coaching discipline implement the boundaries. In reality, practitioners may self identify their practice boundaries. Indeed, approximately half stated that they negotiated the boundary with their client.

Despite confusion and inconsistency in boundary recognition, experienced practitioners demonstrated confidence in their abilities to identify when issues were better suited to counselling than coaching. Additionally, the majority claimed to have appropriate capabilities to help their clients with issues that may arise in practice. However, when reported qualifications were taken into consideration, these claims appeared to be anomalous.

Competencies are intertwined with concepts of self, identity and experience (Wenger, 2000). The notion of competence may be related to the accumulated skills and professional development. In a profession that is adaptable and incorporates knowledge from various occupations, competence may be difficult to define and open to challenge (Wenger, 2010). It could, therefore, be suggested that experienced practitioners'

apparent confidence may, in fact, be overconfidence in the skills and abilities they have gained from previous occupations. As a result, experienced practitioners may demonstrate a Dunning-Kruger effect (1999), whereby an individual with limited skills and abilities mistakenly self-assesses their competence as much higher than is accurate.

A further cause for concern highlighted within the study was experienced practitioners' engagement in supervision. Whilst regular supervision is required by professional bodies, to ensure safe counselling practice, supervision is a recommendation for coaches. The survey results indicated that 56% of experienced practitioners reported being in supervision. When taking into consideration the number of counsellors who took part in the survey, it would appear that a third of coaches were currently utilising supervision for support and development.

The most illuminating findings from this study were the number of experienced practitioners who favoured integrating coaching and counselling approaches in practice. Whilst it should be recognised that over half (53%) disagreed and indicated that coaching and counselling should be kept separate, nearly a third indicated that the helping approaches should be integrated rather than seeking to implement boundaries.

6.2.4 Implications from the second study

The findings from the second study contribute to the body of knowledge within coaching and counselling by enhancing understanding of practitioners' perceptions of practice boundaries. Whilst some practitioners may argue for the clear delineation of coaching and counselling by suggesting theoretical boundaries between the two disciplines, the outcomes from the second study do not indicate a consistent application of boundaries in practice. Indeed, it would appear that definition of boundaries may be contextual and based on the practitioners' knowledge and ability to help the client with issues presented in practice.

Additionally, the outcomes illustrate anomalies in experienced practitioners' perceptions of abilities. The coaches and counsellors who took part in the study indicated an extensively positive self assessment of their abilities to assist clients with issues that may arise. However, reference to reported education and qualification made it hard to reconcile what knowledge and abilities practitioners were drawing on to manage all the issues a client may bring to coaching or counselling sessions. Whilst practitioners may acquire tacit knowledge from previous occupations and professional backgrounds, they may subsequently demonstrate overconfidence in their self assessment of their capabilities. As a consequence, it could be argued that self assessment of their ability to effectively support their clients may be over estimated. Indeed, it could be argued that some practitioners show a cognitive bias to the Dunning Kruger effect (1999).

These findings have important implications for practice and would appear to indicate that many practitioners exceed their competence when working with clients. In order to enhance public perceptions of counselling, professional bodies have established protocols for counselling training. These include developing an understanding of theoretical knowledge, gaining practice experience, engaging in personal development and supervision of practice. In addition, post-qualification, counsellors are required to continue professional and personal development in supervision. In comparison, coaching practitioners have developed their knowledge and understanding from multiple sources and have no requirement to demonstrate self knowledge or reflect on practice. Without appropriate capabilities and understanding of how to support clients with psychological problems, coaches may inadvertently find themselves in difficult situations which they are unable to manage or contain.

It would, therefore, appear that concerns regarding coaching as a form of 'therapy-lite' (Rogers, 2011) may be justified. In the first study, novice practitioners indicated their willingness to work beyond their competence.

Additionally, in the second study, experienced practitioners claim to be able to address most issues that their clients bring. It may, therefore, not be appropriate to suggest that coaches should not be 'squeamish' about working with emotional or psychological problems (Rogers, 2011). Instead, it may be more pragmatic to acknowledge that working in the grey or fuzzy area requires an understanding of psychological concepts and therapeutic skills.

If coaching practitioners, either consciously or unconsciously, support clients emotionally and psychologically, it would seem appropriate for them to have gained appropriate skills and abilities to support the client effectively. Accepting that practitioners require an understanding of psychological knowledge, counselling skills and self-awareness has implications for coaching education. Instead of implementing coach training, which is less rigorous than counselling training (Turner, 2010), it would seem that a more comprehensive programme, which addresses the realities of practice, would be more appropriate.

Evidence from this programme of research would suggest that coaches need to engage in training that incorporates psychological knowledge and develops 'psychological mindedness' (Berglas, 2002) to develop best practice within the profession (Cross & Watts, 2002). Whilst this recommendation may meet with considerable resistance from professional coaching bodies, evidence from the first and second studies would appear to demonstrate that these requirements are necessary for ethical practice across the helping spectrum. In addition, it could be suggested that training programmes would need to include a framework to help practitioners reflect on practice and enhance their personal and professional development.

Findings from the second study also indicated that a third of practitioners believe that coaching and counselling practice should be integrated. This outcome has significant implications for practice and considerations for how practitioners can manage the interaction between coaching and

counselling practice. These outcomes contribute to coaching and counselling knowledge by demonstrating that, rather than maintain boundaries between the helping approaches, practitioners demonstrate a willingness to work across boundaries to support their clients.

6.2.5 Study 3 - Qualitative Exploration of Working with the Boundaries

The third study in this programme of research investigated how experienced practitioners made sense of their coaching and counselling experience. The qualitative research utilised interpretive phenomenological analysis to gain a deeper understanding of coaches' and counsellors' experience of working with the boundaries between coaching and counselling in practice. The inclusion of phenomenological philosophy in the investigation helped to provide an understanding of the practitioners' life world and how individuals interacted with their life world (Jarvis, 2006).

The relationship between a practitioner's knowledge and how they see themselves plays a fundamental role in how they position their practice; what disciplines they work in, and the boundaries they maintain. Each person subjectively constructs their world in relationship with others. Their integration with the social world incorporates personal meanings and complex structures (Lave, 1991). Participants in the study self identified their helping roles. The practitioners identified themselves as coaches, counsellors, coach-therapists, therapist-coaches and an occupational psychologist. Instead of referencing theoretical boundaries, each participant described their idiosyncratic way of working which was seen to be meaningful to them.

From the participants' testimonies, it appeared that each coach and counsellor subjectively defined their own boundaries based on their intention, capabilities and willingness to be flexible in their support of the client. In effect, it could be argued that, rather than theoretical boundaries, practitioners self identified personal boundaries, boundaries of capabilities and boundaries of awareness. In addition, their testimonies appeared to

indicate that the client had a significant role in co-constructing the boundary. In the previous study, practitioners had acknowledged that they negotiated their boundaries with their clients. In the qualitative study, it appeared that the client brought their expectations and personal boundaries into the supportive relationship. Therefore, boundary identification and definition involved a dynamic interplay between the practitioner and the client.

Some participants were adamant that clear boundaries should be maintained between coaching and counselling. One expressed her opinion that it was 'a nonsense' to work across boundaries. She felt that it was important to establish stronger boundaries between the helping approaches, to enable coaching to meet the criteria of a traditional profession. However, it is debatable whether coaching will achieve professional status. Many professions require members to have formal academic qualifications, evidence of practice, a code of ethics, and self or state regulation. In addition, various professions implement coaching strategies as part of the service they deliver. Therefore some claim that coaching is not a separate profession, but an area of practice which is shared across many communities (Spence, 2007; Lane, Stelter & Stout-Rostron, 2014). Furthermore, as information is readily shared on social media and the Internet, establishing discrete knowledge bases becomes difficult and, as a result, the concept of a profession has been challenged (Wenger, 2010; Cavanagh & Lane, 2012).

The process of taking part in the research also enabled practitioners to gain insight into their own practice. During a research interview, one participant became aware of their phenomenological rationale for maintaining clear boundaries. Rather than establish discrete professions, she realised that the boundaries she established in practice reflected her own personal boundaries and a need to keep her 'self' safe.

Multi-membership of professional communities and individual identities help practitioners to participate across boundaries. By gaining experience

from different professions, the individual develops knowledge which informs their identity. As practitioners combine knowledge, confront novel situations and utilise their capabilities, individuals may endeavour to introduce new ways of working or frameworks (Wenger, 2000). As a result, new models of practice emerge in response to client demands. Due to a combination of knowledge, the emergent practice may include cross-disciplinary concepts and ideas (Cavanagh & Lane, 2012). The cross-disciplinary integration may then enable the practitioner to support the client and resolve issues to achieve their desired outcomes (Spence, 2012). In the third study, several participants had worked between disciplines and re-contracted with the same client to offer support. The multidisciplinary way of working was felt to be ethical and utilised contracts to demarcate transitions between discrete areas of practice. Several participants discussed working with contracts and using the agreements to frame their supportive interventions.

Practice may be seen to be ever evolving and shaped by practitioners (Wenger, 2010). Practitioners may evaluate their emergent practice and adapt to various contexts and client needs (Cavanagh & Lane, 2012). In addition to multidisciplinary practice, a few practitioners explained that they had merged the coaching and counselling disciplines and transitioned smoothly between helping approaches. The practitioners who had adopted the interdisciplinary approach had all worked as integrative counsellors previously and felt that including coaching was a natural progression to help their clients grow. This emerging practice was seen as challenging when managing the supportive relationship. Two of the practitioners who used the interdisciplinary approach had adopted a personal consultancy framework to help structure their practice and help with movements from working with a coaching focus to deeper psychological issues. Additionally, one practitioner had included spirituality in her transdisciplinary approach. The mature practitioner had gained a wealth of counselling and coaching skills, which she used intuitively to assist her clients. Whilst limits were negotiated in advance, the emergent

multidisciplinary, interdisciplinary and transdisciplinary practices facilitated a renegotiation of boundaries to meet the client's needs should issues arise.

The participants discussed managing self-disclosure when working between disciplines. One, who was focused on maintaining clear boundaries, felt that it was not possible to self disclose when coaching and then retract personal information when supporting in a counselling frame. Whilst this concern would appear to be relevant, practitioners shared that they were mindful of self-disclosure when coaching clients and the transition to counselling occupied a different space within the interdisciplinary framework.

Practitioners considered public perceptions of coaching and counselling. They described how the client may seek to choose coaching, when needing counselling, due to the stigma associated with mental health problems. In particular, it was felt that the more positive and dynamic descriptors used for coaching may make the supportive approach more acceptable to men, who may be reluctant to seek support in counselling.

Practitioners discussed the emotional and psychological issues that had arisen in their practice. Four of the participants had subsequently undertaken additional training to develop their knowledge and capabilities. Many of the practitioners felt that all coaches and counsellors needed to have psychological and therapeutic skills to support their clients. All practitioners expressed concerns about the variability and inconsistency of coaching and counselling training. One referred to the courses that were freely available online and that individuals could take a week-long course and then practice as a coach or counsellor. He reflected on his extensive counselling training, which included practice experience, personal development, regular supervision, and acquisition of theoretical knowledge. He emphasised the personal and financial investment in gaining knowledge and abilities.

All practitioners reflected on the benefits of support in supervision. One felt it would be more appropriate for coaches to self identify when supervision was felt to be necessary, rather than have regular supervision based on the number of practice hours. However, this suggestion did not appear to accommodate the needs of people who had joined the coaching profession or newly trained coaches who may also need additional support. Practitioners who had transitioned to the emergent practices discussed their concerns relating to locating appropriate supervision to support their multidisciplinary practice. The participants felt that professional bodies could offer assistance to help practitioners identify appropriate supervisors and ethical guidelines to support integrated to practice.

6.2.6 Implications from the third study

Psychology as a profession is based on the assumption that an established core knowledge base allows practitioners to practice in a manner that can be predicted and controlled. However, human interactions are complex and these professional expectations are not always met (Cavanagh & Lane, 2012). An understanding of the complex systems that underlie coaching and counselling practice is important for the growth of coaching and coaching psychology. Indeed, Cavanagh & Lane (2012) suggest that, in order to gain an understanding of the phenomena of emergent practice, research methodologies need to integrate multiple perspectives. Further, they suggest that research should also include narratives to provide evidence of non-linear coaching practice.

The third study in the programme of research makes important contributions to the body of knowledge in respect of emergent practice in coaching and counselling. Whilst research has previously referred to practitioners working in the grey area, this study has illustrated how practitioners have developed multidisciplinary, interdisciplinary and

transdisciplinary practice to work across coaching and counselling boundaries.

In addition, the testimonies of coaches, counsellors, coach-therapists and therapist-coaches have demonstrated that practitioners' self identify boundaries in practice rather than adhere to unsubstantiated theoretical propositions. The practitioners appeared to refer to their own capabilities, knowledge and personal boundaries to idiosyncratically identify the boundaries of their practice. In addition, the role of the client was considered and how the client's expectations and boundaries create a dynamic interaction to agree parameters of practice. These findings have implications for coaching and counselling practice. Rather than suggest that boundaries can be clearly delineated, these outcomes would suggest that it is important for all practitioners to develop self awareness and sufficient capabilities to support their client in a supportive relationship. As a consequence, these findings reinforce the conclusions and implications from the first and second studies. It could, therefore, be suggested that all coaching and counselling practitioners need to develop a psychological understanding to support their client and identify how the client expectations affect the practice boundaries.

The third important outcome from this study relates to public perceptions of coaching and counselling. Practitioners felt that the coaching approach may be seen as more attractive to men who would be less willing to engage in counselling for support. As coaching has been adopted within mental health environments, it could be suggested that it may be beneficial to develop an interdisciplinary intervention to support men with their psychological problems.

6.3 Limitations of this dissertation

6.3.1 Methodology

When considering the research methodology for this dissertation, I took into consideration the primary purpose of the exploratory investigations

and the overarching aims of the research. To provide a breadth and depth of understanding, qualitative, quantitative and mixed methods designs were used to provide complementary sources of data, which could be combined to develop a rich appreciation of practitioners' perceptions and experiences of working with boundaries in practice. Mixed method research triangulates both qualitative and quantitative data to provide multifaceted understandings. In addition, qualitative studies used recognised techniques and inform understanding of coaching dilemmas and interactions at a fundamentally deep level (Passmore & Fillery-Travis, 2011).

As the programme of research focused on practitioners' views and opinions, it could be argued that the most significant limitation for these studies was self-selection of participants for in-depth interviews and self report surveys. Although I endeavoured to attract a wide variety of coaches and counsellors to take part in the research, there is a possibility that a certain sector of the target population did not engage with the study and, therefore, there is under coverage of certain aspects of coaching and counselling. For instance, few coaching and counselling psychologists took part in the research. This is regrettable, as it was believed that psychologists would be able to offer valuable insights and experiences of practice.

Interpretive phenomenological analysis is now embraced within research (Passmore & Fillery-Travis, 2011). IPA can be used with deliberately selected sample sizes. The themes that arise from each individual account may share commonalities with other participants' experiences and, therefore, can be repeated across cases to evolve dominant themes. Whilst this approach may demonstrate that common experiences, feelings and meaning reoccur in the sample, due to the unique and subjective nature of the accounts caution needs to be exercised when extrapolating the findings to a wider population. Further, it should be acknowledged that all researchers bring their own knowledge, assumptions and presence to

the investigation. Inferential quantitative data is interpreted through the lens of a researcher's knowledge and understanding. Equally, subjective qualitative accounts may be influenced by social interaction and biases (Hanson et al., 2005). Indeed, Pringle and Drummond (2011) argue that IPA potentially has a high risk of variance due to different ways of interpreting the data and the themes that emerge from analysis of personal experiences. They suggest that the reader may also interpret the outcomes themselves and may not agree with the explanations offered. To address these concerns, I have endeavoured to be transparent about my role in the interpretation of the interview transcripts. I have clearly set out my personal background, experience, knowledge and rationale for undertaking the research in the preface at the front of this dissertation. The IPA of novice and newly trained coaches' interview transcripts was triangulated with quantitative data in the mixed methods study in Chapter 3 to demonstrate the validity and credibility of identified themes. For the IPA study of practitioners' experiences of working with the boundaries between coaching and counselling, I have acknowledged that the interpretation of meanings from participants' phenomenological accounts have been co-constructed reflexively.

In addition, the criteria to demonstrate trust in the data and authenticity have been met within this programme of research:

Credibility	The IPA studies have demonstrated a depth of understanding in new coaches and experienced practitioners. The phenomenological analysis interpreted contextual lived experiences and the meaning of participants' interactions with their lived world.
Dependability	By implementing a mixed method study, survey and qualitative interviews, the outcomes of the studies demonstrate breadth and depth of understanding.

Confirmability	Statistics from the surveys have been reported and excerpts on participants' interviews have been included in the research thesis to illustrate findings and interpretations.
Transferability	Whilst the testimonies of the participants and the results may not reflect all the opinions of coaching and counselling practitioners, the findings provide an insight into coaches' and counsellors' perceptions of working with boundaries between approaches in practice.

In addition, to demonstrate authenticity, it has been suggested that the researcher needs to demonstrate fairness in the representation of different perspectives. According to Rodwell (1998), the research should also demonstrate:

- **Ontological authenticity**

In the first study, novice and newly trained coaches indicated gaining self awareness when reflecting on their perceptions during the interviews. In addition, participants in the mixed methods study stated they had found the survey 'thought provoking'. Further, reflection on practice generated self awareness and insight in several practitioners in the third study. Evidence of ontological authenticity is reported in Chapter 5.

- **Educated authenticity**

The findings from this programme of research demonstrate the implications to practice and deepen understanding of the meanings of participants' perceptions. These are illustrated in the results and discussion of the first and third study.

- **Catalytic authenticity**

Co-constructed thoughts or actions have been reported as reflections on practice and in the reporting of results in the analysis of the first and third studies in this body of research.

- **Tactical authenticity**

Tactical authenticity has been demonstrated in the interactions between the researcher and the participants during interviews. In addition, discussing their perceptions helped counsellors and coaches to reinforce positive self concepts and new identities.

6.3.2 Materials

The quantitative survey materials implemented in the programme of research were developed to measure novice and experienced practitioners' views of the similarities and differences between coaching and counselling, skills and abilities, and experiences of identifying and managing boundaries in practice. The questionnaire developed for qualitative data collection in the mixed methods study in Chapter 3 was compiled from common terms and descriptions of coaching and counselling found in literature relating to the boundaries between counselling and coaching (Zeus and Skiffington 2001; Bluckert, 2005; Bachkirova, 2007). In addition, to enable comparison across studies, questions relating to identifying mental health and managing boundaries were replicated with permission from a survey developed for previous research (Price, 2009). Comparison of outcomes provided important insights into coaches' willingness to exceed their competence in practice (see Chapter 3). Whilst the words and terms used in the survey would appear to be familiar and generally understood, it could be argued that interpretation of items may be dependent on context. Indeed, several terms could be dependent on coaches having a clear knowledge of what the terms imply (e.g. stress and distress). Further, novice and newly-trained coaches may not have encountered situations described in the practice related questions, but may have hypothetically rated themselves unrealistically.

The survey compiled for the experienced practitioners study in Chapter 4 was comprised of questions designed to yield relevant demographic data

and a selection of forced choice items, which focused on three categories: (1) Similarities and differences; (2) Skills and Abilities; and (3) Boundary recognition and management. In addition, an open text question was included to enable practitioners to share experiences of managing the boundary in practice. From the pilot study of the survey, concerns were raised in relation to the forced report items. Participants felt that practitioners were forced to provide an answer without explanation or context. Additionally, one reported that items may be open to interpretation. These issues were carefully considered before commencing the experienced coach and counsellor study. However, after reflecting on the aim of the quantitative study, it was felt that providing participants with additional open text boxes to provide context and justify choices would detract from the intent of forcing practitioners to commit to a specific response, thereby diluting the strength of the quantitative data.

Problems experienced with the semi-structured interviews in the mixed methods study provided opportunities to learn from experience and develop their research skills. Whilst the semi-structured interview schedule was utilised flexibly and prompted questions to encourage further explanation, the answers given by the participants were not expansive. As a result, the transcripts were short and provided very specific information. Although this limited the length of accounts for analysis, it highlighted the narrow range of knowledge and experience that novice and newly trained coaches had to draw on to inform their practice decisions. In addition, conducting in-depth interviews remotely using the Skype Internet interface may also have affected the content of the interviews. Whilst a rapport was established, the dialogue between interviewer and participants was occasionally stilted. The pauses between questions and concerns for the reliability of Internet connections may have inhibited the flow of the participant's narrative. As a consequence, it is likely that this will have impacted on the openness of responses.

In contrast, the third study interview schedule included open questions to allow for more flexibility. In addition, all the interviews were conducted face to face with practitioners in a location that was comfortable and convenient for them. At times, dialogue in the interviews was conversational to enhance rapport. I was concerned that during some exchanges they may have inadvertently influenced the content of the narrative. To demonstrate transparency and ensure reliability of the account, I raised the issue with one participant, who replied:

“You didn’t, because for all I know you could have thought, any answer I give you, you could be thinking, ‘Bloody hell, that’s a bit much. Is that what she really thinks?’ So I have no idea what you think” (Olivia).

The response was reassuring and demonstrated that my interviewing technique had developed and improved.

6.3.3 Participants

Attracting participants to take part in the mixed method study was challenging. Despite snowball sampling, directly contacting coach training providers and inviting participation in journals and social media, the sample size for the quantitative aspect of the study was small. To overcome these issues in the following quantitative survey, an incentive was offered to encourage greater participation. Incentivising experienced practitioners’ participation in the quantitative survey increased the response rate; however, the number of coaches and counsellors who completed the survey was moderate at best. Therefore, whilst the results illustrate some interesting issues and highlight concerns, it is debatable whether results could be generalised to the wider population of professional groups.

6.3.4 Future directions

The experiences of coaches and counsellors reflect the realities of practice and inform future directions for research. The findings from the study have brought to light the considerable role that the client plays in the

interplay between counselling and coaching (see Chapter 5). Rather than a passive consumer of services, the client, organisations and the general public appear to greatly influence the segregation and integration of helping approaches. This significant factor appears to have been largely overlooked in much of the previous debate into boundaries between coaching and counselling.

Seeking to differentiate between the approaches would appear to be destined to be unsuccessful when the client chooses coaching instead of engaging in counselling or mental health services. Indeed, it would appear to be the client who may unwittingly blur the lines, with practitioners either accommodating their needs or containing them in the approach requested. Outcomes from this research have shown that the responsibility to hold the client and manage the situation ethically when problems arise can place a burden on the practitioners. Whilst many coaches may reinforce boundaries by referring to contractual agreements and established expectations, some practitioners may feel ethically compelled to uphold a duty of care to their vulnerable client.

With many similarities in skills and approaches that coaching and counselling share, it is perhaps not surprising the general public may not understand the difference between helping approaches and what coaching and counselling approaches provide. Alternatively, individuals may be wary of being associated with counselling or mental health problems. Although the government has established an initiative to address stigma and dispel discrimination, the campaign has only demonstrated moderate success. It would, therefore, appear that stigma within the UK is still prevalent and may inform a client's decision whether to seek counselling or choose a more positive coaching approach instead. It could be argued that it would be beneficial to instigate an education programme to inform the general public about the support options available through coaching and counselling to enhance well-being and positive mental health. By raising awareness, individuals would be able to make an informed choice

of the support that they would readily engage with to achieve positive outcomes.

In a similar vein, an additional area for future research identified in the findings would be to investigate the male attitudes to coaching and help seeking behaviour. Due to negative perceptions of mental health, it is possible that clients may request coaching in an attempt to conceal their psychological problems. Previous studies have shown that men find it difficult to ask for help when challenged or experiencing difficulties (Addis & Mahalik, 2003). However, internalising masculine roles and endeavouring to be tough and inexpressive has been found to have negative consequences for physical and mental health (Courtney, 2000). As men appear to readily engage with the coaching, it has been suggested that the coaching approach may be seen to be aligned with masculine values of enhanced performance, success and developing strengths. As a consequence, coaching may be perceived to be an acceptable means of seeking help that does not challenge internalised concepts of male gender role socialisation (McKelley & Rochlen, 2007). Therefore, rather than seeking to dissuade men from sharing experiences and emotions in coaching, it may be beneficial to identify ways that coaching can be utilised to enhance emotional competency (Kilburg, 1996).

Competency, training and regulation have been a consistent thread throughout this programme of research. Practitioners have called for regulation of coaches to build confidence in coaching and the standards of service delivered in Study 2 and Study 3. The mixed methods study into novice and newly trained coaches' perceptions raised concerns relating to the content and provisions of coach training programmes, with participants indicating they may be willing to work beyond their competence. These issues were echoed in the comments of experienced practitioners in Study 2.

Although previous research has indicated the need for standardised and regulated training over the past 10 years, these concerns have yet to be translated into agreed standards for training syllabi in the coaching industry. It has been suggested that one of the main requirements of training is that there is a clear focus on what training aims to achieve, the teaching strategies and whether the assessment methods are appropriate for the desired outcomes (Donati & Watts, 2005). Further, to develop training programmes, schools and providers need to understand what trainees need to learn to become effective practitioners (Passmore, 2010). The findings from Study 1 would appear to provide important information that can inform the key criteria for training programmes; it can also initiate discussions between professional bodies and coach training providers to develop standardised and recognised training programmes.

The findings from the second and third studies suggested there is a high probability that coaches will work with clients who have mental health problems. Importantly, coaches need to be able to identify and manage mental health issues. Few coaching courses discuss mental health issues or how to manage when warning signs are identified in the client (Passmore, 2009). Additionally, practitioners in the third study stated that not all counsellors were able to identify mental health problems and manage them effectively. They noted that, contrary to popular perceptions, counselling training does not always include a great deal of information about how to identify mental health problems or how to manage the psychological difficulties effectively. The findings from this programme of research demonstrate that simply presuming that clients do not have any mental health problems is insufficient. Indeed, it could be argued that a coach's diagnostic abilities need to be particularly astute, as the coaching client is not seeking help from mental health problems and may actively attempt to conceal underlying difficulties.

It would, therefore, seem fundamental that coach training incorporates aspects which help practitioners to define mental health issues and

identify mental health problems when they arise in practice. Although practitioners reported feeling very confident in identifying mental health issues and the difference between stress and distress, many may not have received specific training in how to identify these problems and, as a result, may base their judgements on intuition. It is possible that coaches may have undertaken additional training to augment their practice and improve their knowledge and skills. As a result, practitioners may have gained an understanding of mental health difficulties and feel more assured in assessing and identifying possible problems. However, if identification of mental health issues relies solely on intuition and personal experience, this is a matter for concern. Intuition is not always reliable and subtleties may be missed. It could, therefore, be argued that subtle mental health issues problems such as personality disorder, social phobia or general anxiety disorder may not be accurately recognised. Indeed, it could be suggested that working beyond competency and ethical responsibility may endanger both the practitioner and client.

As newly trained coaches appear to require continued support following qualification, it could also be suggested that experience of working with clients and facilitating the creation of solutions in various contexts may be beneficial. Therefore, it could be argued that training should incorporate a minimum number of practice hours. Having the opportunity to practice skills and apply knowledge whilst training may help to boost newly trained coaches' confidence in their competence. In addition, feedback on the outcomes of practice could also serve to enhance personal development. It could be argued that supervision also assists in personal development, by encouraging the practitioner to reflect on practice to develop reflexivity and greater self knowledge.

When coaches experience ethical dilemmas in practice, they may use their intuition or refer to ethical codes of conduct from professional bodies. However, it could be argued that the newly trained coach may not have sufficient experience to draw on to inform their intuition. They are also

more likely to have less practical knowledge of context or the full meaning behind codes of conduct should they refer to the guidelines (Passmore, 2009). It would, therefore, seem advisable that newly trained coaches remain in regular supervision for a minimum period post qualification to ensure the inexperienced practitioners receive the support and learning opportunities necessary to become a competent practitioner.

Professions are often required to establish and maintain a strong code of conduct, including ethical conduct and agreed qualification standards required to enter the profession (Passmore, 2011). To progress towards minimum standards of coaching, it could be suggested that coaching professional bodies commence a process of consultation to agree parameters for minimum requirements and standardisation of coach training programmes. Following agreement, recommendations for appropriate syllabi that accommodate the various approaches to coaching (e.g. executive coaching, developmental coaching, performance coaching) to be delivered through coach training providers could be reviewed by the coaching community to ensure acceptance by the majority. It could be suggested that enhancing coach training programmes could build confidence in coaching and the standards of help and support provided by coaches. Furthermore, to instil confidence in practitioners and ensure consistency in practice, the support and collaboration of counselling and coaching professional bodies may also be necessary to establish ethical guidelines for practitioners who work with both coaching and counselling approaches in practice.

6.4 Conclusion

The research explored practitioners' perceptions of working with the boundary and the challenges that can be experienced when trying to identify and manage the boundary in practice. It could be argued that the inherent value of research lies in how the outcomes affect the way people perceive phenomena and how the findings can be applied in the real world

(Yardley, 2000). Findings from the research provide a powerful understanding of how gaining practice experience is a journey with many potential pitfalls, misunderstandings and uncertainty along the way. The experiences of coaches and counsellors reflect the realities of practice and inform future directions for research and regulation.

Possibly the most important findings related to the competence and confusion of newly trained coaches. The research in this dissertation presented unique insights into the limitations of newly trained coaches as the start in professional practice. The findings highlight the need to enhance training programmes to help trainee coaches develop the skills and abilities to confidently identify and manage mental health problems and gain a deeper understanding of the psychological theories that inform practice. The principal contribution of this thesis has been to identify the considerable support for enhanced coach training amongst practitioners. Collectively, the practitioners' perceptions represent a significant groundswell of opinion on the need for coach training to demonstrate rigour and credibility.

One of the most original and notable features of the research was the explanation of merging coaching and counselling in practice. Whilst there may be great efforts to clearly delineate between coaching and counselling, it could be argued that, due to client expectations and practitioners' best intentions, the coaching and counselling approaches collide and merge in an attempt to provide a holistic supportive service. It could be appreciated from the experiences of practitioners who wish to work in the middle ground that support is needed from professional bodies to help them navigate this emerging approach to helping confidently and ethically.

These findings are important and support the aims of this thesis. Utilising practitioner perspectives provides a research with high practical validity. As coaching research becomes more focused on randomised controlled trials and quantitative evaluation to demonstrate effectiveness, studies that

emphasise ecological validity ensures that research does not become overly technical and inaccessible to practitioners. I found the research illuminating and very enjoyable. The practitioners who have chosen to take part in the research generously gave their time and opinions on issues which may have felt controversial. Their honesty and authenticity is greatly appreciated. When interpreting the results, I was mindful of ensuring their comments were reflected in context and not misrepresented.

It could be argued that the main objective of research is to use the knowledge gained from investigation for the good of society. I am proud of the findings from this programme of research and would hope that the knowledge gained could lead to discussion and collaboration between the professional bodies. By working together, criteria for comprehensive training programmes may be established to ensure professional practitioners feel confident and competent in the service that they deliver.

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Appendix A. Permission to Use Research Questionnaire

On 20 Feb 2010, at 15:39, SARAH BAKER wrote:

Hello John

Allow me to introduce myself. My name is Sarah Baker and I am a PhD student at the University of Bedfordshire researching practitioner's perceptions of the boundaries between counselling and coaching.

I am writing regarding your excellent article 'The coaching/therapy boundary in organizational coaching', in Coaching: An International Journal of Theory, Research and Practice.

My current research entails gaining an understanding of novice coach's perception of the boundaries between coaching and counselling. In your article I was particularly drawn to your findings that 52% of your sample had not specifically received coaching training and 51% "had no psychological or therapeutic experience". Further, your conclusion that the future of coaching may be determined by the definition of core competencies applied in context also interested me.

As a recent criticism of coaching research has been that there is not enough uniformity in the measures used to evaluate similar aspects of coaching, I was wondering if it would be possible for you to send me a copy of the questionnaire that you developed (along with any reliability or validity analysis you may have undertaken), to see if the survey could be adapted to fit my study.

You would, of course, be credited with development of the questionnaire in any future publication of my work.

Thank you for your time and consideration. I look forward to hearing from you in the near future

Kind Regards

Sarah Baker

University of Bedfordshire

sarah.baker@beds.ac.uk

07929 466384

>>> John Price 01/03/10 10:52 AM >>>

Sarah

Sorry to be so slow in coming back to you.

I have lots going on at the moment. But I have found a copy of my questionnaire, and will copy it and send it to you shortly.

Kind regards

John

On 1 Mar 2010, at 15:29, SARAH BAKER wrote:

Thanks John

I appreciate you taking the time when you're so busy

kind regards

Sarah

Hi Sarah

Finally I have managed to find the time, and got my scanner to work with a Mac.

Attached are the 3 sheets of the questionnaire - the focus does not look great, but hopefully they are readable.

I did not do any reliability analysis, although I guess that there is enough data to do so. I had come to the conclusion that the boundary, in the framework that the questions came from, probably did not exist. I do not know enough about statistics to have made a judgment based on any particular knowledge, but I felt that to put statistical measures on such responses did not make much sense. I believed that I would have to recast a set of questions arising out of my conclusion to get any reliable data.

The fact that the responses seemed inconsistent was a concern in itself. I believe that for the conclusions I arrived at to be in any way reliable, in-depth interviews are needed to find out how the inconsistency was formed.

If I can help any more, just let me know.

Kind regards

John

Appendix B. Coaching schools approached for Study 1

1. Academy of Executive Coaching
2. Acorn Principle Plus Ltd
3. Ashridge'
4. Barefoot Coaching
5. Bath Consultancy Group
6. Bluesky
7. Bluesky International
8. Centre for Coaching
9. Chatting Scott partnership
10. Clutterbuck Associates
11. Coach Training Institute
12. Coaching Development
13. DMU Business School'
14. Elliot Griffiths
15. Henley Business School
16. i-coach academy
17. Lancaster University
18. Learning Curve
19. Leeds Metropolitan
20. Management future
21. Maynard Leigh Associates
22. Metanoia
23. Meyler Campbell
24. New U coaching
25. Newcastle Business School
26. OPM
27. Oxford Brookes
28. Middlesex University
29. Performance Coach Training
30. Performance consultants
31. Praesta partners LLP
32. Results Coaching Systems
33. Sheffield Hallam University
34. Starr consulting
35. Stonebridge Associated Colleges
36. Strathclyde University
37. The Coaching Academy
38. The Grove Practice
39. The OCM group
40. The School of Coaching:
41. The Tavistock Institute
42. University of Derby
43. University of Exeter Business School
44. Wellness for life

Research Information Sheet

You are invited to take part in a research study to examine novice coaches' perceptions of the boundaries between Counselling and Coaching. This research is being conducted by Sarah Baker as part of a PhD Thesis at the University of Bedfordshire

Before you decide whether or not you would like to take part in the research, it is important that you understand why the research is being done and what it will involve.

The purpose of this research study is to gain a greater understanding of newly trained coach's awareness and application of the boundaries between Coaching and Counselling. The information gained from the research will offer important insights into current ethical dilemmas experienced by practitioners and may be used in the future to make recommendations for training and best practice.

The study is in two parts. The first part of the research involves completing an online questionnaire. The questionnaire takes approximately 15 minutes to complete and contains questions relating to newly trained coaches' perceptions of the differences between coaching and counselling. The questionnaire can be accessed here:

<http://www.surveymonkey.com/s/WDK29QD/thecoachingpsychologist>

The second part of the research entails separate interviews with (up to) 10 participants. The interviews will take up to 30 minutes. Should you decide to take part in an interview, you will be given an information sheet to keep and asked to sign a consent form. I will then arrange a location and time for the interview that is convenient to you. However, if you change your mind at any time, you are free to withdraw without giving a reason.

The interview will be audio recorded and transcribed onto a computer. The audio recordings will be stored on an encrypted USB memory stick and the computer data will also be security protected. At the end of the study the recordings will be erased. When the interviews are transcribed, all participants in the study will be identified only by coded letters or false names. Participants will therefore remain anonymous. The transcripts of the interviews will be analysed by myself and cross referenced by an independent researcher, who will not have access to any participant's names or personal details. Your responses will remain confidential.

After completing the research, I will write a report which may be published in a peer reviewed journal or presented at conference. No participant will be identifiable in any publications.

If you would like a summary of the report, please contact me with either an email or postal address and I will ensure a copy is sent to you.

Thank you for your interest.

This study has been reviewed and approved by the University Research Ethics Committee, University of Bedfordshire. If you have any queries or would like any further information, please do not hesitate to contact me.

Sarah Baker
University Of Bedfordshire
Email: sarah.baker@beds.ac.uk
Phone: 07929 466384

Appendix D. Study 1 Consent Form



Participant Consent Form

Novice Coach's Understanding of the Boundaries between Coaching and Counselling

Sarah Baker, Department of Psychology, University of Bedfordshire,
Park Square, Luton, Bedfordshire, LU1 3JU

Please initial box

1. I agree to take part in the above study.
2. I confirm that I have read and understood the information sheet and have had the opportunity to ask questions.
3. I understand that my participation in the study is entirely voluntary and that I am free to withdraw at any time without explanation.
4. I agree to the interview being audio recorded

☐☐☐☐

Please tick box

Yes

No

5. I agree to the use of anonymous quotes in publication

☐☐

Name

Signature

Date

Researcher

Signature

Date

Appendix E. Study 1 Questionnaire

Sarah Baker
Department of Psychology
University of Bedfordshire
sarah.baker@beds.ac.uk

The aim of the questionnaire is to measure novice coaches' perceptions of the boundaries between coaching and counselling.

Your participation in this study is completely voluntary. The information gathered will remain anonymous and confidential. However, if after further consideration, you decide that you do not want your data included in the research, please be assured that you may withdraw from the study at any time.

If, having read and understood the above, you agree to participate in this study, please sign below

The questionnaire should take approximately 15 minutes to complete.

Thank you

Signature..... Date.....

Participant No.....

The following questions are aimed at understanding of practitioner's perceptions of the similarities and differences between coaching and counselling. Some aspects or descriptions may be used by both approaches. Please tick any that apply.

1. Which approach(es) would be suited to helping the following?

High functioning individuals	Coaching	<input type="radio"/>	Counselling	<input type="radio"/>
Normal functioning individuals	Coaching	<input type="radio"/>	Counselling	<input type="radio"/>
Dysfunctional individuals	Coaching	<input type="radio"/>	Counselling	<input type="radio"/>

2. Which issues can be addressed by coaching and/or counselling?

Self limiting beliefs	Coaching	<input type="radio"/>	Counselling	<input type="radio"/>
Confidence	Coaching	<input type="radio"/>	Counselling	<input type="radio"/>
Self esteem	Coaching	<input type="radio"/>	Counselling	<input type="radio"/>
Anxiety	Coaching	<input type="radio"/>	Counselling	<input type="radio"/>
Interpersonal problems	Coaching	<input type="radio"/>	Counselling	<input type="radio"/>
Anger	Coaching	<input type="radio"/>	Counselling	<input type="radio"/>
Aggressive behaviour	Coaching	<input type="radio"/>	Counselling	<input type="radio"/>
Problems following bereavement	Coaching	<input type="radio"/>	Counselling	<input type="radio"/>
Work performance	Coaching	<input type="radio"/>	Counselling	<input type="radio"/>
Alcoholism	Coaching	<input type="radio"/>	Counselling	<input type="radio"/>
Self acceptance	Coaching	<input type="radio"/>	Counselling	<input type="radio"/>
Passive aggression	Coaching	<input type="radio"/>	Counselling	<input type="radio"/>
Over compliance	Coaching	<input type="radio"/>	Counselling	<input type="radio"/>
Developing resilience	Coaching	<input type="radio"/>	Counselling	<input type="radio"/>
Distress	Coaching	<input type="radio"/>	Counselling	<input type="radio"/>
Drug use	Coaching	<input type="radio"/>	Counselling	<input type="radio"/>
Depression	Coaching	<input type="radio"/>	Counselling	<input type="radio"/>
Self awareness	Coaching	<input type="radio"/>	Counselling	<input type="radio"/>

3. Which of the following aspects apply to coaching and/or counselling?

Adult to adult relationship	Coaching	<input type="radio"/>	Counselling	<input type="radio"/>
-----------------------------	----------	-----------------------	-------------	-----------------------

Goal focused	Coaching	<input type="radio"/>	Counselling	<input type="radio"/>
Alleviating distress	Coaching	<input type="radio"/>	Counselling	<input type="radio"/>
Non directive	Coaching	<input type="radio"/>	Counselling	<input type="radio"/>
Time limited	Coaching	<input type="radio"/>	Counselling	<input type="radio"/>
Proactive	Coaching	<input type="radio"/>	Counselling	<input type="radio"/>
Present and future focused	Coaching	<input type="radio"/>	Counselling	<input type="radio"/>
Dynamic approach	Coaching	<input type="radio"/>	Counselling	<input type="radio"/>
Exploration of client's feelings	Coaching	<input type="radio"/>	Counselling	<input type="radio"/>
Quick results	Coaching	<input type="radio"/>	Counselling	<input type="radio"/>
Clients able to process personal matters in a rational way	Coaching	<input type="radio"/>	Counselling	<input type="radio"/>
Improve functioning	Coaching	<input type="radio"/>	Counselling	<input type="radio"/>
In depth analysis of issues	Coaching	<input type="radio"/>	Counselling	<input type="radio"/>
Exploration of client's past history	Coaching	<input type="radio"/>	Counselling	<input type="radio"/>
Active listening	Coaching	<input type="radio"/>	Counselling	<input type="radio"/>
Feedback	Coaching	<input type="radio"/>	Counselling	<input type="radio"/>
Calm approach	Coaching	<input type="radio"/>	Counselling	<input type="radio"/>
Flexibility	Coaching	<input type="radio"/>	Counselling	<input type="radio"/>
Understanding how thoughts and emotions influence behaviour	Coaching	<input type="radio"/>	Counselling	<input type="radio"/>

4. Which practitioners demonstrate the following qualities and skills?

Respect for client's beliefs and values	Coach	<input type="radio"/>	Counsellor	<input type="radio"/>
Commitment to 'helping' relationship	Coach	<input type="radio"/>	Counsellor	<input type="radio"/>
Empathy	Coach	<input type="radio"/>	Counsellor	<input type="radio"/>
Ability to diagnose mental health problems	Coach	<input type="radio"/>	Counsellor	<input type="radio"/>
Confidentiality	Coach	<input type="radio"/>	Counsellor	<input type="radio"/>
Ethical practice	Coach	<input type="radio"/>	Counsellor	<input type="radio"/>
Trustworthy	Coach	<input type="radio"/>	Counsellor	<input type="radio"/>
Respect for diversity and difference	Coach	<input type="radio"/>	Counsellor	<input type="radio"/>

Honesty	Coach	<input type="radio"/>	Counsellor	<input type="radio"/>
Regulated training	Coach	<input type="radio"/>	Counsellor	<input type="radio"/>

5. Which outcomes are expected in coaching and/or counselling

Achieving potential	Coaching	<input type="radio"/>	Counselling	<input type="radio"/>
Decision making	Coaching	<input type="radio"/>	Counselling	<input type="radio"/>
Reduced distress	Coaching	<input type="radio"/>	Counselling	<input type="radio"/>
Motivation	Coaching	<input type="radio"/>	Counselling	<input type="radio"/>
Learning	Coaching	<input type="radio"/>	Counselling	<input type="radio"/>
Self awareness	Coaching	<input type="radio"/>	Counselling	<input type="radio"/>
Improved performance	Coaching	<input type="radio"/>	Counselling	<input type="radio"/>
Increased self esteem	Coaching	<input type="radio"/>	Counselling	<input type="radio"/>
Realizing goals	Coaching	<input type="radio"/>	Counselling	<input type="radio"/>

6. Psychological theories are used to help clients in both coaching and counselling. Are the methods used similar or different?

Cognitive Behavioural approach Similar ☐ Different ☐
(If different, in what way?)

Person-centred/Humanistic approach Similar ☐ Different ☐
(If different, in what way?)

7. How well would the following describe the reasons for you deciding not to start peer coaching?

	Very well	Possibly	Not at all
The client seemed uncommitted to change	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The client appeared to have mental health issues	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The client has significant performance issues	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The work was likely to take me outside of my field of competence	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The client's goals were more about addressing psychological issues that improving wellbeing or improving performance at work	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Other reasons: (please give details)

8. How well would the following possibilities describe the reasons you would finish coaching or refer your client?

	Very well	Possibly	Not at all
The work became past, rather than future orientated	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The client appeared to have mental health problems	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
Goal achievement meant addressing psychological dysfunction	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The client had persistent performance issues	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The client was unable to maintain focus on agreed coaching goals	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The client was resistant to change	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
The client needed more psychological support than I was able to provide	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>
I felt I was moving out of my field of competence	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>

Other reasons – please describe below

9. Have you had any previous experience of coaching?

As a coach Yes ☐ No ☐

As a client Yes ☐ No ☐

10. Have you had any previous experience of counselling?

As a counsellor Yes ☐ No ☐

As a client Yes ☐ No ☐

11. Which of the following best describes your background?

(please tick all that apply)

- | | |
|---|-------------------------------------|
| <input type="radio"/> Social work | <input type="radio"/> Coaching |
| <input type="radio"/> Nursing | <input type="radio"/> Psychology |
| <input type="radio"/> Education | <input type="radio"/> Psychotherapy |
| <input type="radio"/> Human resources | <input type="radio"/> Counselling |
| <input type="radio"/> Other (please give details) | |

12. What is your gender?

Male ☐ Female ☐

13. What is your age?

- ☐ 18-24
- ☐ 25-34
- ☐ 35-44
- ☐ 45-54
- ☐ 55+

Thank you for participating in the study

Should you have any questions or concerns about this questionnaire or would like to withdraw from the study, please contact Sarah Baker on 07929 466384 or sarah.baker@beds.ac.uk quoting the participant number below.

Participant No.....

Appendix F. Study 1 Semi Structured Interview Schedule

1. How would you describe yourself as a person?
2. Please could you tell me about what you do in your job?
3. Can you tell me about your recent coaching training?

Possible prompt: What did it entail? What was covered?

4. How would you carry out coaching?

Possible prompt: Could you describe a good coaching session?

5. How do you feel about coaching clients?
6. What do you think are the similarities between coaching and counselling?
7. How would you describe the differences between coaching and counselling?
8. How confident would you feel in recognising the boundaries between coaching and counselling?
9. How would you feel about referring a client (to another professional service)?

Prompts: Can you tell me more about that?

Probes: You mentioned.....what do you mean by that?
In what way?

Appendix G. Study 1 Transcript (1st Hermeneutic Cycle)

Interview (Rebecca)	Left Hermeneutic	Right Hermeneutic
<p>so I've contacted [my supervisor] and she told me, yeah, you were right to seek advice here, and try and turn the negative into a positive, like to, from quitting something to grow healthier nails, so that's what we've done. And still, throughout the whole process, I've really felt like this is more appropriate for counselling. There was no, the student didn't, wasn't aware of how it was impacting me. So I think maybe, even though it was said at the beginning, maybe it should be emphasised a bit more in the future, that students should choose something which is, you know, like a health behaviour like eating or, even that can go to, the boundaries are very flaky, but, I don't know. There is a line somewhere but it's so easy to cross it on any kind of theme that you choose, isn't it?</p>	<p>Sought assistance/support. Reassurance that this was the right course of action. Reinforces beliefs about inappropriate subject</p> <p>Different way of working – emphasising something that she is capable of doing. Goal to achieve. Manageable. Confident in ability?</p> <p>High discomfort although emphasis of help had changed. Frustration?</p> <p>Awareness of underlying issues. Wariness/anxiety/anger of being put in a situation and not being able to work with it due to lack of knowledge/skills. Helplessness?</p> <p>Self awareness. Anger and frustration with client – selfish or self-absorbed. No consideration for her feelings</p> <p>Felt should have been protected more. Generate more awareness of appropriate subject in coachees</p> <p>Can see the difficulties of keeping any subject 'safe' in coaching</p> <p>Aware of how it can expand and become <u>uncomfortable</u> and unmanageable</p>	<p>Process/Self</p> <p>Coaching/Process/Discomfort</p> <p>Self/Emotions/Process</p> <p>Self/Emotions</p> <p>Self/Emotions</p> <p>Boundaries/Discomfort/Process</p>

Appendix H. Study 1 Superordinate and Subordinate Themes

Superordinate and Subordinate Themes from IPA of Novice and Newly Trained Interviews	
Superordinate Theme	Subordinate Themes
Boundaries	<ul style="list-style-type: none">• Similarities and differences• Identifying Boundaries• Referring clients• Support• Personal boundaries
Knowledge	<ul style="list-style-type: none">• Training & skills• Process• Intuition• Competence• Self knowledge

Appendix I. Study 2 Questionnaire



Sarah Baker
Department of Psychology
University of Bedfordshire
sarah.baker@beds.ac.uk

The aim of the questionnaire is to measure practitioners' perceptions of the boundaries between coaching and counselling.

Your participation in this study is completely voluntary. The information gathered will remain anonymous and confidential. However, if after further consideration, you decide that you do not want your data included in the research, please be assured that you may withdraw from the study at any time.

The questionnaire should take approximately 10 minutes to complete.

As a thank you for taking the time to fully complete the questionnaire, your name will be entered into a prize draw for an Apple iPad. To ensure that you are eligible to win the prize, please answer ALL relevant questions and make sure that you enter a current email address at the end of the survey so that you can be contacted should you win.

Thank you

The following questions are about you and your experience of counselling and coaching

1. What is your current profession?

- ☐ Counsellor
- ☐ Coaching psychologist
- ☐ Other (please give details)
- ☐ Coach
- ☐ Counselling psychologist

2. How long have you worked as a counsellor/coach?

- ☐ Less than a year
- ☐ 1-3 years
- ☐ 3-5 years
- ☐ 5-10 years
- ☐ More than 10 years

3. What is your highest level of education?

- ☐ Level 2 - GCSE/O level
- ☐ Level 3 - A level/Scottish Highers
- ☐ Level 4 - Foundation degree (HND, HNC)
- ☐ Level 5 - Bachelors degree (BA, BSc)
- ☐ Level 6 - Masters degree (PgCert, PdDip)
- ☐ Level 7 - Doctorate
- ☐ Other

4. Do you hold a counselling or coaching qualification?

Yes ☐ No ☐

5. Is your qualification accredited?

Yes ☐ No ☐

If yes, who is the qualification accredited by?

- | | |
|---|----------------------------|
| <input type="radio"/> BPS | <input type="radio"/> BACP |
| <input type="radio"/> Association of Coaching | <input type="radio"/> UKCP |
| <input type="radio"/> EMCC | <input type="radio"/> ICF |
| <input type="radio"/> Other (please give details) | |

6. Have you had experience of coaching?

As a coach Yes ☐ No ☐

As a client Yes ☐ No ☐

7. Have you had experience of counselling?

As a counsellor Yes ☐ No ☐

As a client Yes ☐ No ☐

8. Which of the following best describes your background?

(please tick all that apply)

- | | |
|---|-------------------------------------|
| <input type="radio"/> Management | <input type="radio"/> Coaching |
| <input type="radio"/> Business | <input type="radio"/> Psychology |
| <input type="radio"/> Education | <input type="radio"/> Psychotherapy |
| <input type="radio"/> Human resources | <input type="radio"/> Counselling |
| <input type="radio"/> Other (please give details) | |

9. What is your gender?

Male ☐ Female ☐

10. What is your age?

- ☐ 18-24
- ☐ 25-34
- ☐ 35-44
- ☐ 45-54
- ☐ 55+

The following questions are aimed at understanding of your perceptions and experience of working with the boundary between coaching and counselling.

There are clear boundaries between counselling and coaching

Strongly agree	Agree	Neutral	Disagree	Strongly Disagree
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

The boundary between counselling and coaching is hard to identify

Strongly agree	Agree	Neutral	Disagree	Strongly Disagree
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

I find it easy to recognise where the boundary between counselling and coaching lies

Strongly agree	Agree	Neutral	Disagree	Strongly Disagree
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

There are many differences between coaching and counselling

Strongly agree	Agree	Neutral	Disagree	Strongly Disagree
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

There are more similarities than differences between counselling and coaching

Strongly agree	Agree	Neutral	Disagree	Strongly Disagree
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

I am confident in identifying when an issue is better suited to counselling than coaching

Strongly agree	Agree	Neutral	Disagree	Strongly Disagree
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Sometimes I feel out of my depth

Strongly agree	Agree	Neutral	Disagree	Strongly Disagree
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

I believe that I manage the boundary between counselling and coaching effectively with my clients

Strongly agree	Agree	Neutral	Disagree	Strongly Disagree
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Sometimes I feel unsure whether I am counselling or coaching

Strongly agree	Agree	Neutral	Disagree	Strongly Disagree
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

I am always aware of working within my competency

Strongly agree	Agree	Neutral	Disagree	Strongly Disagree
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

I have discussed the boundary between counselling and coaching in supervision

Strongly agree	Agree	Neutral	Disagree	Strongly Disagree
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

I feel confident in identifying mental health problems

Strongly agree	Agree	Neutral	Disagree	Strongly Disagree
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

I feel that I have received sufficient training to identify the boundary between counselling and coaching

Strongly agree	Agree	Neutral	Disagree	Strongly Disagree
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Boundary recognition is instinctive; I just feel when the dynamic has changed

Strongly agree	Agree	Neutral	Disagree	Strongly Disagree
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

The boundary between coaching and counselling is often negotiated with my client

Strongly agree	Agree	Neutral	Disagree	Strongly Disagree
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

An understanding of psychological theory underpins my practice

Strongly agree	Agree	Neutral	Disagree	Strongly Disagree
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

I am confident applying psychological models and strategies in practice

Strongly agree	Agree	Neutral	Disagree	Strongly Disagree
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

I would refer my client to other professional services, if necessary, without hesitation

Strongly agree	Agree	Neutral	Disagree	Strongly Disagree
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

I am confident that I can identify the difference between stress and distress

Strongly agree	Agree	Neutral	Disagree	Strongly Disagree
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

I feel I can manage most issues that my client would like to address

Strongly agree	Agree	Neutral	Disagree	Strongly Disagree
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

If I felt the client would benefit from counselling or coaching *and I have the expertise to help*, I would advise the client and offer to re-contract to provide the service

Strongly agree	Agree	Neutral	Disagree	Strongly Disagree
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Coaching is mainly goal directed

Strongly agree	Agree	Neutral	Disagree	Strongly Disagree
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

Counselling addresses deep rooted personal issues

Strongly agree	Agree	Neutral	Disagree	Strongly Disagree
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

I believe that it is difficult to consistently apply boundaries in practice

Strongly agree	Agree	Neutral	Disagree	Strongly Disagree
<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

I think that counselling and coaching should be integrated, rather than looking for boundaries

Strongly agree
☐

Agree
☐

Neutral
☐

Disagree
☐

Strongly Disagree
☐

My clients are aware of the ethical guidelines for practice

Strongly agree
☐

Agree
☐

Neutral
☐

Disagree
☐

Strongly Disagree
☐

I feel that my training has provided me with the skills to be an effective practitioner

Strongly agree
☐

Agree
☐

Neutral
☐

Disagree
☐

Strongly Disagree
☐

Finally.....

Have you experienced any problems identifying or managing the boundary between counselling and coaching in practice?

If yes, please describe below

Thank you for taking part in the research.

Completed surveys will be automatically entered into the prize draw. However, should you have any questions or concerns about this questionnaire or would like to withdraw from the study, please contact Sarah Baker on 07929 466384 or sarah.baker@beds.ac.uk

Terms and conditions of the prize draw

1. Participants completing the Practitioner's Perceptions of the Boundaries between Counselling and Coaching Survey will be automatically entered into the free prize draw. Entrants must be registered practicing counsellors or coaches.
2. The prize is an Apple iPad.
3. There will be one winner. The winner will be notified by email within 28 days of the end of the survey. The winner will be drawn at random under independent supervision from all entries received with contact details.
4. No cash alternative will be offered.
5. The prize is not transferable.
6. The draw will not be subject to appeal and no correspondence will be entered into. Entry to the prize draw implies acceptance of these rules.

Appendix J. Study 2 Experienced Practitioners' Accreditation

BABCP

IACP

NCOI

University of South Australia

Institute of Leadership and Management

ILM

Australian Psychological society

AHPP

University of Warwick and Wolverhampton University

ACC

National Counselling Society

NCS

BJA

COSCA

CRUSE

INLPTA

New Insights

NCFE

UK Coaching Academy

SCUK

Institute of Career Guidance

NOCN

NMC

Ashridge

HPC

PTUK

Newcastle College

ANLP

Institute of Neuro Semantics

CPCAB

University of Chester : PG Cert

PCCCA

NCS

Appendix K. Study 2 Experienced Practitioners' Background

Forensic
Management Consultancy
Organisation Development
Business consulting
Civil Service
Law
Accountancy
Science
Medical nursing
Nursing
Youth work
Engineer
Research
Mental health nursing
Communications
Marketing
Mental health nursing
Training
Healthcare
Social services
Nursing
Physiotherapy
Mental Health
Local government
Senior Manager
Health and fitness

Appendix L. Study 2 Experienced Practitioners Prior Experience

Psychological Wellbeing Practitioner
Clinical & Forensic Psychologist
Business Development
Psychotherapeutically-trained executive confidant
Chartered Occupational Psychologist that also offers Coaching
Integrative Coach-Therapist
Psychological Coach
IO psychologist with coaching responsibilities
Trainee counsellor
Client advocate - sexual violence
Psychotherapist
Personal coach therapist
Teacher
Trainer
Psychotherapist
Coaching as part of leadership role
Mediator
Coach therapist
Consultant
Coach & trainer
Scientific manager
Education coach
Trainer/mentor
Career Coach and Career Counsellor
Occupational Psychologist
Management development trainer
Lecturer
Dyslexia Specialist
Mental health nurse and family therapist
Play therapist
Occupational Health Nurse with counselling and coaching courses
Manager
Therapist/Coach
Counsellor & coach

Appendix M. Study 2 Experienced Practitioners' Professions

Psychological Wellbeing Practitioner
Clinical & Forensic Psychologist
Business Development
Psychotherapeutically-trained executive confidant
Consultant - Executive development
Chartered Occupational Psychologist that also offers Coaching
Integrative Coach-Therapist
Psychological Coach
Industrial and Organisational psychologist
Client advocate - sexual violence
Psychotherapist
Personal coach therapist
Trainer
Psychotherapist
Author
Mediator
Coach therapist
Consultant
Coach & trainer
Education coach
Trainer/mentor
Career Coach and Career Counsellor
Occupational Psychologist
Counsellor in training
Management development
Lecturer
Dyslexia Specialist
Mental health nurse and family therapist
Play therapist
Occupational Health Nurse
Manager
Therapist/Coach

Appendix N. Review of Previous Studies

Study	Aim	Sample size	Measures	Findings
Hart, V., Blattner, J. & Leipsic, S. (2001). Coaching Versus Therapy A Perspective. <i>Consulting Psychology Journal: Practice and Research</i> , 53 (4), 229-237.	Understand practitioners viewpoints about the differences between therapy and coaching	30 Counsellors or therapists that had moved into coaching	Structured interview comprised of 7 questions No details of method of analysis	Differences Relationship Limitations of coaching Mental health concerns Qualities unique to coaching Control
Skerten, B. & Chapman, L. (2006). Life Coaching and Counselling Making Connections. <i>New Zealand Journal of Counselling</i> , 26 (3), 26-40.	Investigate whether any unique aspects of life coaching could help in counselling and whether counselling has any factors that could help life coaching.	8 Life coaches	Interviews No details of type of interview or method of analysis	Similarities (solution focused approaches) Coaching as positive Relationship Self disclosure
Alves Marques, T. (2006). The Experience of the Counsellor as an Executive Coach. Poster session presented at the BPS SGCP 1 st International Coaching Psychology Conference, London. 18-19 December.	Investigate experience of working as a coach and counsellor simultaneously	4 Executive coaches (with counselling or psychotherapy experience)	Semi- structured Interviews Thematic analysis	Main theme emerged as 'helper' Other themes focused on positive beliefs contrasted with challenges faced when working with clients
Jopling, A. (2007). <i>The fuzzy space: Exploring the experience of the space between psychotherapy and executive coaching</i> . Unpublished MSc Dissertation, New School of Psychotherapy and Counselling, London, UK.	Exploration of executive coaches' experience of working in the fuzzy area between coaching and counselling	12 Executive coaches (10 with psychotherapy or counselling experience)	Conversations Hand written notes Steivick-Colaizzi-Keen phenomenological analysis	Themes; Relationship Contracting Duty of Care Holistic approach of working with the whole person
Griffiths, K. & Campbell, M. A. (2008). Semantics or substance? Preliminary evidence in the debate between life coaching and counselling. <i>Coaching: An International Journal of Theory, Research and Practice</i> , 1 (2), 164-173.	Investigation into coaches' and clients' experiences of life coaching and counselling	5 Life coaches 9 Clients	Semi-structured interviews Comparative analysis	Similarities: Approaches Interpersonal skills Differences: Focus Intention Contracting Power dynamics Coaching clients seen as robust Concerns about mental health
Maxwell, A. (2009). How do business coaches experience the boundary between coaching and therapy/counselling? <i>Coaching: An International Journal of Theory, Research and Practice</i> , 2(2), 149-162.	Explore executive coaches experience the boundary between coaching and counselling	8 Executive coaches (4 with psychological training & 1 trained as a counsellor)	Semi-structured interviews Interpretative Phenomenological Analysis	4 Main themes emerged from analysis: Pandora's box Co-created boundary Working at the boundary Differentiations

Price, J. (2009). The coaching/therapy boundary in organisational coaching. <i>Coaching: an international journal of theory, research and practice</i> , 2 (2), 135-148.	Investigate organisational coaches beliefs regarding the coaching and therapy boundary	192 Coaches	Survey design Reported frequencies	Differences identified as: Goal focus, shallow, future focused. Coaches believed there is a clear difference, but couldn't state what the difference was. Highlighted concerns relating to identification of mental health issues and working within competences.
Jinks, D. (2010). <i>An exploration into the thoughts and perceptions of four coaches around the concept of Personal Consultancy</i> . Unpublished MSc Dissertation, University of Hull, UK.	To investigate perceptions of Personal Consultancy	4 Coaches	Semi structured interviews via Skype Interpretative Phenomenological Analysis	Blending approaches impacted on practitioners self concept. Internal conflicts regarding boundary management. Working within competencies Dismissive of brief training programmes. Blending approaches as well as maintaining separation. Concerns relating to ethics
Turner, E. (2010). Coaches' views on the relevance of unconscious dynamics to executive coaching. <i>Coaching: An International Journal of Theory, Research and Practice</i> , 3 (1), 12-29.	Investigate views relating to unconscious dynamics in coaching	372 Executive coaches 15 Executive coaches	Survey Frequencies reported Interviews Inductive analysis	Coaches suggested a middle path for training. Identifies need to increase psychological awareness and enhance personal development. Refers to intuition as a means of identifying boundary. Highlights regulation of training. Alludes to the grey area between coaching and counselling and the need for improved training to assist boundary management.

Appendix P. Study 3 Information Sheet



Research Information Sheet

You are invited to take part in a research study to examine practitioners' perceptions of the boundaries between Counselling and Coaching. This study is being conducted by Sarah Baker as part of PhD research programme at the University of Bedfordshire

Before you decide whether or not you would like to take part in the research, it is important that you understand why the research is being done and what it will involve.

The purpose of this research study is to gain a greater understanding of experienced practitioners' awareness and application of the boundaries between Coaching and Counselling. The information gained from the research will offer important insights into current ethical dilemmas experienced by practitioners and may be used in the future to make recommendations for training and best practice.

The study is in two parts. The first part of the research involves completing an online questionnaire. The questionnaire takes approximately 10 minutes to complete and contains questions relating to practitioners' perceptions of the boundaries between coaching and counselling. The questionnaire can be accessed here: https://bedshealthsciences.eu.qualtrics.com/SE/?SID=SV_bpFxuKe86zi9Phz

The second part of the research entails separate interviews with experienced counsellors, counselling psychologists, coaching psychologists and coaches. The interviews will take approximately one hour. Should you decide to take part in an interview, you will be given an information sheet to keep and asked to sign a consent form. I will then arrange a location and time for the interview that is convenient to you. However, if you change your mind at any time, you are free to withdraw without giving a reason.

The interview will be audio recorded and transcribed onto a computer. The audio recordings will be stored on an encrypted USB memory stick and the computer data will also be security protected. At the end of the study the recordings will be erased. When the interviews are transcribed, all participants in the study will be identified only by coded letters or false names. Participants will therefore remain anonymous. The transcripts of the interviews will be analysed by myself and cross referenced by an independent researcher, who will not have access to any participant's names or personal details. Your responses will remain confidential.

After completing the research, I will write a report which may be published in a peer reviewed journal or presented at conference. No participant will be identifiable in any publications.

If you would like a summary of the report, please contact me with either an email or postal address and I will ensure a copy is sent to you.

Thank you for your interest.

This study has been reviewed and approved by the University Research Ethics Committee, University of Bedfordshire. If you have any queries or would like any further information, please do not hesitate to contact me.

Sarah Baker
University Of Bedfordshire
Email: sarah.baker@beds.ac.uk
Phone: 07929 466384

Appendix Q. Study 3 Consent Form



Participant Consent Form

Practitioner's Experience of Identifying and Applying the Boundaries between Coaching and Counselling

Sarah Baker, Department of Psychology, University of Bedfordshire,
Park Square, Luton, Bedfordshire, LU1 3JU

Please initial box

1. I agree to take part in the above study.
2. I confirm that I have read and understood the information sheet and have had the opportunity to ask questions.
3. I understand that my participation in the study is entirely voluntary and that I am free to withdraw at any time without explanation.
4. I agree to the interview being audio recorded

☐☐☐☐

Please tick box

Yes

No

5. I agree to the use of anonymous quotes in publication

☐☐

Name

Signature

Date

Researcher

Signature

Date



Semi structured interview schedule

1. To get us started, how would you describe yourself as a person?
2. Could you tell me a little bit about your work?
3. What would you say was the primary goal of counselling/ coaching?
4. What do you think are the similarities between counselling and coaching?
5. How would you describe the differences between counselling and coaching?
6. Can you think of a time when you've talked about the difference between counselling and coaching with a client?

Prompt: Could you tell me what was discussed?

7. Can you tell me how you define the boundary between counselling and coaching when working with clients?

Prompts: Could you give me a specific example?

How easy is that to identify?

How easy is that to apply?

8. Can you think of a time when you found the boundary difficult to identify?

Prompts: How did that feel?

How did you manage that?

When did that happen?

9. Can you think of anything that could help practitioners manage the boundary between counselling and coaching?

10. In a few words, how would you summarise your feelings about the boundary between counselling and coaching?

General prompts: Can you tell me more about that?

Probes: You mentioned.....what do you mean by that?
In what way?

Appendix S. Study 3 Participants' Occupations and Experience

Participant Pseudonym	Gender	Current Occupation	Details of Practice	Experience of Coaching	Experience of Counselling	Training
Amanda	Female	Coach and Counsellor	Experienced counsellor, currently coaching in multiple roles	Currently coaching in multiple organisations	Experienced counsellor. Has experience of personal therapy	Counsellor training
Andrea	Female	Occupational Psychologist	Independent occupational psychologist, including coaching and training	Coaching in varied organisations	Has experience of personal therapy	Registered Psychologist
Audrey	Female	Therapist-Coach	Experienced counsellor. Has developed own model to integrate counselling and coaching	Utilises solution focused coaching in newly developed Fusion model of integrating counselling and coaching	Experienced Counsellor. Has experience of personal therapy	Counsellor training
Bethany	Female	Coach and counsellor	Experienced coach working in organisations. Newly qualified counsellor	Experienced coach in multi-national organisations	Newly trained counsellor. Has experience of personal therapy	Coach training. Counsellor training
Christine	Female	Personal Consultant	Experienced counsellor integrating coaching in Personal Consultancy model	Life coaching	Experienced counsellor Has experience of personal therapy	Counsellor training
Clare	Female	Coach and Counsellor	Experienced counsellor and coach. Works in several coaching and counselling roles	Experienced coach. Developing coach training programme	Experienced counsellor. Has experience of personal therapy	Counsellor training
Dave	Male	Coach	Personal development coach	Experienced coach		Existential coach training
Emily	Female	Advocate, Coach and counsellor	Experienced coach working in organisations. Recently completed counselling and psychotherapy training	Experienced internal coach	Newly trained counsellor. Has experience of personal therapy	Internal coach training Counsellor training
Gwen	Female	Executive Coach and Counsellor	Experienced executive coach and counsellor, working holistically with clients.	Experienced executive coach	Experienced counsellor. Has experience of personal therapy	Counsellor training
Heather	Female	Coach	Holistic developmental coach, works at the 'deep end' with clients	Experienced coach and trainer	Has experience of personal therapy	Adult Learning MA
Helen	Female	Confidence Coach	Counsellor and performance coach, integrating both approaches in practice	Recently trained coach	Experienced counsellor	Counsellor training Coach training

Jenny	Female	Coach-Therapist and Author	Experienced counsellor and coach, integrating skills in holistic practice.	Experienced coach	Experienced counsellor	Counsellor training
Joanne	Female	HR Professional, Coach and Counsellor	Experienced internal coach, developing counselling skills to utilise in independent practice	Experienced internal coach	Newly trained counsellor	Internal coach training Counsellor training
Olivia	Female	Coach and Trainer	Experienced therapist and coach, adopting a holistic approach to coaching, group work and training	Experienced coach and trainer	Experienced therapist	Counsellor training
Rachael	Female	Equine Psychotherapist and Coach	Experienced psychotherapist delivering equine therapy and coaching to organisations	Equine coaching for personal development	Experienced therapist	Psychotherapy training
Robert	Male	Counsellor	Experienced counsellor working with adults and children	None	Experienced counsellor	Counsellor training
Ruth	Female	Coach, Therapist Author and Academic	Experienced coach, counsellor, trainer and author delivering teaching to academia and coaching in organisations	Experienced coach and trainer	Experienced counsellor and supervisor	Counsellor training Coach training
Sandra	Female	Personal Consultant	Experienced counsellor incorporating coaching in Personal Consultancy model with children and adults	Coaching with children	Experienced counsellor	Counsellor training
Susan	Female	Transpersonal Coach	Experienced psychotherapist and coach. Working as a coach and supervisor	Experienced holistic coach and supervisor	Experienced psychotherapist	Psychotherapy training
Trudy	Female	Psychological Coach	Experienced internal coach, adopting a psychological approach to inform holistic coaching.	Experienced internal coach	Has experience of personal therapy	Internal coaching training Counsellor training

Appendix T. Study 3 Transcript (Hermeneutic Cycle 1)

Interview (Amanda)	Left hermeneutic	Right hermeneutic
<p>Well, it depends on the context I think, first of all, with the coaching particularly, because I think, it's like, even on the programmes, what they actually want you to achieve can be slightly different and certainly the bias or nuance of the programmes can be different. So for example, on two of the programmes we use the same psychometric, but one of them we use three parts of the psychometric and the other one we only use one and that changes too, depending on the feedback. So, but in essence, what I feel I want to do for anybody that I work with, is to help them see themselves in a balanced way, so to see what they actually have</p>	<p>Goals depend upon context.</p> <p>Difference in programmes introduce nuances and biases</p> <p>Good illustration. When using psychometrics it depends how the test is applied, how much of the test is applied and what results are being looked for.</p> <p>Overall want to help people gain self awareness and be able to see themselves holistically. To encourage awareness of strengths and how these can help them overcome their limitations or weaknesses.</p>	

Appendix U. Study 3 Superordinate and Subordinate Themes

Superordinate and Subordinate Themes of Practitioners' Perceptions of Working with the Boundary between Counselling and Coaching	
Superordinate Theme	Subordinate Theme
Boundaries	<ul style="list-style-type: none"> ▪ Managing the boundary ▪ Acknowledging the middle ground ▪ Professional concerns
Differences	<ul style="list-style-type: none"> ▪ Aspects of temporality ▪ Purpose and context ▪ Containment or expansion ▪ From crisis to flourishing
Relationship	<ul style="list-style-type: none"> ▪ Roles and responsibility ▪ Connecting and giving attention ▪ Facilitating change
Knowledge	<ul style="list-style-type: none"> ▪ Psychological content ▪ Experience and training ▪ Competence
Self	<ul style="list-style-type: none"> ▪ Awareness, doubt and engagement ▪ Reflecting on practice ▪ Support and supervision
Ethics	<ul style="list-style-type: none"> ▪ Need for guidelines ▪ Mental health and a duty of care ▪ Public perceptions